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Hazardous Materials Information Review Commission Canada

2006-2007
Estimates

Part III – Report on Plans and Priorities

Canada



The Estimates Documents

Each year, the government prepares Estimates in support of its request to Parliament for authority to spend public monies. This request is formalized through the tabling of appropriation bills in Parliament. The Estimates, which are tabled in the House of Commons by the President of the Treasury Board, consist of:

Part I – The Government Expense Plan provides an overview of federal spending and summarizes the key elements of the Main Estimates.

Part II – The Main Estimates directly support the *Appropriation Act*. The Main Estimates identify the spending authorities (votes) and amounts to be included in subsequent appropriation bills. Parliament will be asked to approve these votes to enable the government to proceed with its spending plans. Parts I and II of the Estimates are tabled concurrently on or before March 1.

Part III – Departmental Expenditure Plans, which is divided into two components:

- 1) **Reports on Plans and Priorities (RPPs)** are individual expenditure plans for each department and agency (excluding Crown corporations). These reports provide increased levels of detail over a three-year period on an organisation's main priorities by strategic outcome(s), program activity(s) and planned/expected results, including links to related resource requirements. The RPPs also provide details on human resource requirements, major capital projects, grants and contributions, and net program costs. They are tabled in Parliament by the President of the Treasury Board on behalf of the ministers who preside over the appropriation dependent departments and agencies identified in Schedules I, I.1 and II of the *Financial Administration Act*. These documents are usually tabled on or before March 31 and referred to committees, which may then report to the House of Commons pursuant to Standing Order 81(4).
- 2) **Departmental Performance Reports (DPRs)** are individual department and agency accounts of results achieved against planned performance expectations as set out in respective RPPs. These Performance Reports, which cover the most recently completed fiscal year, are tabled in Parliament in the fall by the President of the Treasury Board on behalf of the ministers who preside over the appropriation dependent departments and agencies identified in Schedules I, I.1 and II of the *Financial Administration Act*.

Supplementary Estimates directly support an *Appropriation Act*. The Supplementary Estimates identify the spending authorities (votes) and amounts to be included in the subsequent appropriation bill. Parliamentary approval is required to enable the government to proceed with its spending plans. Supplementary Estimates are normally tabled twice a year, the first document in early November and a final document in early March. Each Supplementary Estimates document is identified alphabetically A, B, C, etc. Under special circumstances, more than two Supplementary Estimates documents can be published in any given year.

The Estimates, along with the Minister of Finance's Budget, reflect the government's annual budget planning and resource priorities. In combination with the subsequent reporting of financial results in the Public Accounts and of accomplishments achieved in Departmental Performance Reports, this material helps Parliament hold the government to account for the allocation and management of public funds.

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Hazardous Materials Information
Review Commission

Conseil de contrôle des renseignements
relatifs aux matières dangereuses

Hazardous Materials Information Review Commission

2006–2007

Report on Plans and Priorities

Tony Clement
Minister of Health

Canada

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Section I Overview

President's Message

The Hazardous Materials Information Review Commission is an independent, quasi-judicial agency that is positioned within the health portfolio. Our clients and stakeholders represent industry manufacturers, employers, workers, and governments at the federal, provincial and territorial levels. The Commission's mandate is threefold. First we protect *bona fide* trade secrets on behalf of the chemical industry. Secondly, we perform health and safety reviews of the documentation associated with the hazardous product which is the subject of the trade secret claim. Thirdly, we provide a tribunal review process where Commission staff decisions are contested. Simply stated the mandate of the Commission is to balance the rights of industry to protect their trade secrets and the rights of those using their products to know the health and safety impacts. In performing our duties and functions, we strive to build a relationship of trust and respect with our clients and stakeholders. It is therefore essential that we perform our mandate with objectivity, neutrality and transparency. The environment in which we operate is complex, international and multi-jurisdictional involving federal, provincial and territorial legislation.

For suppliers and employers in the chemical industry who cite trade secret information as a critical success factor in their business, the economic value of the confidential business information associated with the claims for exemptions they file is significant. This includes cases where the trade secret formulation may be the result of an expensive research and development effort. For those claims processed by the Commission in 2004–2005, and based on information provided by claimants, the collective economic benefit resulting from the protection of claimed trade secret information was estimated to be in the order of \$400 million.

While innovation and competitiveness are crucial to a successful industry, it is equally important that the right to withhold trade secret information is balanced with the right of workers to be fully and properly informed on how to safely handle and use claim related controlled products. The Commission's findings of non-compliance (published annually) respecting its statutory review of safety documentation further demonstrate the need for this balance as the Commission issues formal orders, outlining corrective measures to be taken by claimants, for virtually all claims. In 2004–2005, a total of 2,103 violations were ordered to be corrected.

In the coming fiscal year, our goal is to seek support to reintroduce *An Act to amend the Hazardous Materials Information Review Act* (formerly Bill S-40) which died on the Order Paper upon the dissolution of Parliament. The proposed amendments are important to the Commission, its clients and stakeholders, and will bring to fruition our renewal commitments to improve service delivery while making our program activities more transparent and accountable. These amendments will reduce the time required to review trade secret claims, speed up the correction of the information that workers need to handle hazardous materials safely and expedite the processing of appeals when Commission decisions are challenged. They will reduce the administrative burden for

both industry and the Commission. The net result will be earlier access by workers to complete and accurate information on the safe handling of hazardous materials. This can only be positive for workplace safety.

The Commission will also act on its priorities outlined in this plan. In accordance with our multi-year workload estimates, the claims backlog has been reduced. However, our capacity to keep pace with the continued high volume of incoming claims is being challenged. Education, guidance and direction to claimants will remain a focal point of our efforts especially amongst individuals and companies unfamiliar with Canada's regulatory requirements. Outreach activities will continue to ensure public and stakeholder understanding of the Commission's mandate and its relationship and impact on workplace health and safety.

We recognize the importance and necessity of adopting an effective approach to working collaboratively with the federal, provincial and territorial occupational health and safety programs. Indeed we have and will continue to pursue a strong working relationship with our health portfolio partners including other federal departments and agencies.

The Commission will continue to adopt the principles of the Management Accountability Framework (MAF) into our management culture and day-to-day operations. This will ensure a continued focus on effective management of resources and decision making as well as a reinforcement of the importance of public service values, ethics, learning and innovation which are essential in the delivery of results to Canadians and to the development of our program and policies.

As in past years, this fiscal year promises to be an exciting one and I look forward to working with my Council of Governors who collectively represent all clients and stakeholders. Their ongoing support is essential to the successful discharge of our threefold mandate.



Weldon Newton
President and Chief Executive Officer

Management Representation Statement

I submit for tabling in Parliament, the 2006–2007 *Report on Plans and Priorities* (RPP) for the Hazardous Materials Information Review Commission.

This document has been prepared based on the reporting principles contained in the *Guide for the Preparation of Part III of the 2006–2007 Estimates: Reports on Plans and Priorities and Departmental Performance Reports*.

- ▶ It adheres to the specific reporting requirements outlined in the Treasury Board Secretariat guidance;
- ▶ It is based on the department's approval Program Activity Architecture as reflected in its Management Resources and Results Structure (MRRS);
- ▶ It presents consistent, comprehensive, balanced and reliable information;
- ▶ It provides a basis of accountability for the results achieved with the resources and authorities entrusted to it; and
- ▶ It reports finances based on approved planned spending numbers from the Treasury Board Secretariat in the RPP.



Weldon Newton
President and Chief Executive Officer

Program Activity Architecture (PAA) Crosswalk

In June 2005, the Commission submitted an amendment to Treasury Board Secretariat to change the title of its strategic outcome to better reflect the Commission's legislated mandate: the protection of confidential business information and the protection of employers and workers through material safety data sheet (MSDS) accuracy.

	Old title 2005–2006	New title 2006–2007
Strategic Outcome 2006–2007	Trade secret exemptions within the Workplace Hazardous Materials Information System to protect confidential business information. ¹	Trade secret exemptions within WHMIS that balance the right of industry to withhold <i>bona fide</i> confidential business information with the right of employers and workers to be provided with complete and accurate information on the health and safety hazards posed by workplace chemicals.

¹ WHMIS

Context

Labour, industry and government agree on the importance of reducing illnesses and injuries from hazardous materials in Canadian workplaces. The Workplace Hazardous Materials Information System (WHMIS), a combination of laws, regulations and procedures, was created in 1987 to help achieve this goal.

WHMIS requires suppliers—including manufacturers, importers and distributors—to provide information on the hazards of chemicals produced or used in Canadian workplaces. It requires cautionary labelling for containers of certain products that are designated under federal regulations and requires their suppliers to provide MSDSs.

Among the required information, each MSDS lists all hazardous ingredients in the product, any toxicological properties, the safety precautions workers need to take when using the product and first aid treatment in case of exposure. Employers must provide this MSDS information, worker training and education programs to employees.

When labour, industry and government agreed to create WHMIS, they recognized the need to balance the rights of:

- ▶ workers and employers to have health and safety information; and
- ▶ chemical suppliers to protect confidential business information, such as trade secrets.

The *Hazardous Materials Information Review Act* and its Regulations provide the mechanism to create that balance through the Hazardous Materials Information Review Commission (HMIRC). Our Commission is an independent agency with a quasi-judicial role that supports the WHMIS responsibilities and interests of the federal, provincial and territorial governments, workers, employers and the chemical industry.

Mandate

The *Hazardous Materials Information Review Act* mandates our Commission to:

- ▶ register claims for trade secret exemptions and issue registry numbers;
- ▶ adjudicate and issue decisions on the validity of claims for exemption using prescribed regulatory criteria;
- ▶ make decisions on the compliance of MSDSs and labels with WHMIS requirements; and
- ▶ convene independent boards with representatives drawn from labour, suppliers or employers to hear appeals from claimants or affected parties on our decisions and orders.

Mission

The HMIRC mission is to:

- ▶ ensure a balance between industry's right to protect confidential business information and the right of employers and workers to know about the hazardous materials they deal with in the workplace;
- ▶ provide a trade secret mechanism within WHMIS; and
- ▶ resolve complaints and disputes impartially, fairly and promptly through statutory or alternate means.

What the Commission Does

If a supplier or employer wants to withhold information that it believes to be a trade secret, it must file a claim with the Commission for exemption from its WHMIS obligations to disclose this information. Our screening officers review these claims against requirements that are set out in:

- ▶ federal regulations relating to chemical suppliers, and employers under federal jurisdiction; or
- ▶ provincial or territorial regulations relating to employers under their jurisdiction;

and then rule on their validity. This process involves communication to avoid or resolve disputes.

As part of this claim review process, our scientific evaluators play a key health and safety role. They review for completeness and accuracy all the health and safety information for each hazardous ingredient provided on the MSDSs and labels associated with a claim for exemption. When our scientific evaluators identify missing or incorrect information, they provide advice to screening officers who then issue formal orders requiring the necessary changes.

Upon requests, we also respond to the information needs from federal, provincial and territorial government health and safety officials respecting claims for exemption to administer and enforce their WHMIS obligations.

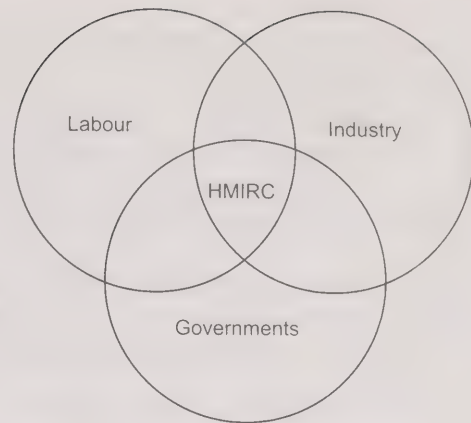
A Model Partnership of Key Stakeholders Across All Jurisdictions

HMIRC deals with many WHMIS stakeholders:

- ▶ labour organizations and workers;
- ▶ suppliers in the chemical industry;
- ▶ employers with workplace WHMIS programs; and
- ▶ federal, provincial and territorial government agencies with WHMIS responsibilities.

As an independent agency, the Commission is a model of industry, labour and government consultation, consensus and cooperation. Our adjudicative efforts must result

in a fair balance between the right of workers to know and the right of suppliers and employers to safeguard confidential business information. We make a tangible contribution to worker health and safety and are a strategic partner to industry and employers. Our work also supports the federal, provincial and territorial governments in the delivery of their occupational safety and health regulatory activities, making HMIRC one of very few adjudicative bodies that represent multiple levels of government in Canada.



Governance Structure

The HMIRC governance structure is a model of collaboration. Our Council of Governors provides strategic advice and guidance to the Commission and makes recommendations to the Minister of Health. It consists of up to 18 members: two representing workers, one each representing suppliers and employers, one representing the federal department of Labour, and between four and thirteen representing the provincial and territorial governments responsible for occupational safety and health.

The HMIRC President and Chief Executive Officer supervises and directs the work of the Commission. He is accountable to Parliament through the Minister of Health.

Vision

HMIRC has defined its vision as:

- ▶ making decisions based on both sound scientific principles and on regulations, and taking pride in being a professional quasi-judicial organization seeking creative and progressive approaches to enhancing workplace safety; and
- ▶ resolving complaints and disputes, whether under statutory mandate or not, in a manner that is impartial, fair and prompt.

Objectives

The HMIRC objectives are to:

- ▶ pursue activities that achieve maximum worker health and safety benefits while minimizing impact and cost to industry standards and practices;
- ▶ improve its processes and programs by using feedback from our clients and stakeholders;
- ▶ achieve established service standards consistently;
- ▶ establish a climate of effective communication to prevent disputes from occurring;
- ▶ utilize a range of mechanisms to resolve effectively the disputes that do occur;
- ▶ guide the operations of the its core programs through a comprehensive policy framework, driven by input from stakeholders;

- ▶ recover costs for processing claims for trade secret exemptions according to the applicable policy;
- ▶ gain high visibility and wide recognition for the work performed; and
- ▶ ensure that its employees exhibit a client-oriented approach.

Values and Operating Principles

HMIRC recognizes that continuous improvement is critical in order to remain relevant and to provide effective and efficient performance and service quality. We have identified the values and operating principles that foster continuous improvement in our operations.

FAIRNESS—in our ability to provide services and to perform statutory functions.

TIMELINESS—in our ability to provide services within established and reasonable time frames.

ACCESSIBILITY and TRANSPARENCY—in our ability to provide information and services simply and clearly and with policies and procedures that are understandable to everyone.

ACCOUNTABILITY—in our ability to propose legislative approaches only when they meet rigorous cost-benefit analysis and to be accountable for programs and the impact of decisions, while providing services in a manner that is cost-effective for everyone involved.

QUALITY and CONSISTENCY—in our ability to render accurate, relevant, dependable, understandable, predictable and error-free decisions, while ensuring consistent, firm enforcement of the regulations.

COMPETENCY and RESPECT—in our ability to provide services based on a high level of skill, knowledge, scientific and technical competence, and to demonstrate respect and professionalism to everyone who comes into contact with the Commission.

SECURITY and CONFIDENTIALITY—in our ability to store and handle the trade secrets of our claimants.

Summary Information

Our mandate is to provide a mechanism for protecting the trade secrets of those companies which manufacture and/or supply hazardous materials and to accurately inform Canadian employees who work with such materials about the intrinsic health and safety hazards.

Financial Resources (\$ thousands)

2006–2007	2007–2008	2008–2009
3,512	3,518	3,518

Human Resources (Full-Time Equivalents)

2006–2007	2007–2008	2008–2009
35	35	35

Agency Activity (\$ thousands)

	Type	Planned Spending		
		2006–2007	2007–2008	2008–2009
Activity #1 Claims exemption process	ongoing	3,512	3,518	3,518

Commission Plans and Priorities

As a small organization with a very specific mandate within Canada's Workplace Hazardous Materials Information System, and taking into account our clear links to stakeholders and limited budget, the Hazardous Materials Information Review Commission is constantly alert to issues that may affect our operations. We know that some factors are unpredictable. For example, we cannot forecast with great accuracy the number of claims for exemption that chemical manufacturers, importers and suppliers will file for our review and decision making. Our resources are also stretched by requirements to meet increased management reporting requirements as part of the commitment to enhanced accountability across the government. Nonetheless, we have been proactive in identifying problems on which we can and do take action.

Between 1998 and 2002, we undertook and implemented a renewal exercise to improve our operations and our relationships with stakeholders. We reduced the paper burden for claimants, introduced dispute prevention and outreach activities and also expanded stakeholder services. As a result, we became a more service-oriented agency that improved the quality, timeliness and cost effectiveness of our activities and outputs. For example, we have been successfully reducing our backlog of claims awaiting processing from 956 in March 2002 to 645 claims, as of January 31, 2006. Continued high volumes of new claims, however, are beginning to pose serious challenges to our ability to keep the number of claims awaiting processing at a reasonable level.

The Commission performs its work based on five priorities:

- ▶ improve services to our clients and stakeholders;
- ▶ manage the workload;
- ▶ monitor implementation initiatives under the Globally Harmonized System
- ▶ improve the focus of outreach activities and stakeholder liaison; and
- ▶ enhance management excellence.

These priorities support the Commission's key activity, the Claims Exemption Process, which in turn supports our strategic outcome.

Under this activity, we register, process and adjudicate trade secret claims within WHMIS, resulting in a balance between the right of industry to protect confidential business information and the right of workers to know about the hazards posed by workplace chemicals.

To support this key activity, we have developed a corporate action plan to help us better identify, integrate and address the challenges that we face. It includes the five priorities described in more detail in Section II of this Report.

In recent years, the Commission's Council of Governors has provided valuable advice and guidance to the President, particularly during our renewal exercise. We will continue to work with the Council as full partners in this tripartite governance structure and to ensure that we remain relevant to the concerns of our stakeholders.

Human resource needs are another focus of our action plan. For example, we depend on highly skilled staff in scientific fields such as toxicology to review the claims and the MSDSs that workers and employers rely on for the proper use of hazardous chemicals in the workplace and to respond to possible cases of exposure to those chemicals. In a small agency such as ours, any staffing gaps have a notable impact on performance.

Section II Analysis by Program Activity

The Hazardous Materials Information Review Commission has a single activity. The Commission's corporate action plan includes five specific plans that address the five priorities, described later in this section.

Strategic Outcome Trade secret exemptions within WHMIS that balance the right of industry to withhold *bona fide* confidential business information with the right of employers and workers to be provided with complete and accurate information on the health and safety hazards posed by workplace chemicals.

Program Activity Claims Exemption Process

Financial Resources (\$ thousands)

2006–2007	2007–2008	2008–2009
3,512	3,518	3,518

Human Resources (Full-Time Equivalents)

2006–2007	2007–2008	2008–2009
35	35	35

Under this activity, HMIRC registers claims for exemption received from a supplier or employer who wishes to withhold critical proprietary information, decides on the validity of the claim, adjudicates and issues decisions on the compliance of material safety data sheet or label to which the claim relates, and administers an appeal process to these decisions.

Expected results

- ▶ Protection of valid confidential business information about suppliers' and employers' hazardous products.
- ▶ A mechanism for workers to be informed about the health and safety hazards of exposure to chemicals found in products associated with claims for exemption.
- ▶ A system that resolves disputes in a fair, efficient and cost effective manner.

Key Program Claims Processing

Financial Resources (\$ thousands)

2006–2007	2007–2008	2008–2009
3,336	3,342	3,342

Under this activity, HMIRC registers claims, thereby enabling companies to sell and/or distribute their product while the claim is being processed. Then the validity of the claim for exemption is determined based on the *Hazardous Materials Information Review Regulations* criteria and the material safety data sheet is evaluated to ensure compliance with WHMIS requirements. Decisions are issued and published in the *Canada Gazette*.

Expected Results/Outputs	Indicators
<ul style="list-style-type: none"> ▶ Manufacturers can import, distribute and sell products <ul style="list-style-type: none"> ▶ Registry number assigned ▶ Published decisions 	<ul style="list-style-type: none"> ▶ number of claims registered ▶ number of complaints from suppliers/claimants about delays ▶ number of published decisions ▶ elapsed time between receipt of claim and registration
<ul style="list-style-type: none"> ▶ MSDSs comply with legislation <ul style="list-style-type: none"> ▶ Advice documents ▶ Compliance with orders 	<ul style="list-style-type: none"> ▶ number of advice documents produced ▶ extent to which claimants have complied with orders within the 75 calendar days allowed

Key Program

Dispute Prevention/Appeals

Financial Resources (\$ thousands)

2006–2007	2007–2008	2008–2009
176	176	176

Under this activity, HMIRC administers an appeal process. Claimants have 45 days to launch an appeal once the decision on a claim exemption is published in the *Canada Gazette*. An independent tripartite board is then convened to hear the appeal and render a decision. We also administer a dispute prevention process that works in conjunction with the appeals process by identifying and resolving problems and complaints, where possible, before an appeal becomes necessary.

Expected Results/Outputs	Indicators
► Resolution of issues raised during the information exchange phase of claims processing (i.e. dispute prevention)	► number of issues raised and resolved
► Appeal decisions	► number of appeals/decisions

To achieve continually improved results throughout our operations, we have identified five specific priorities.

Priorities

1. Improve services to our clients and stakeholders

We have drawn on our experience and that of companies submitting claims to us to identify focal points for our efforts to enhance service and in the spirit of continuous improvement we will continue this in 2006–2007. Of particular importance is our practice of providing more extensive guidance and direction to claimants, with an emphasis on individuals and companies that are new to Canada's regulatory requirements and WHMIS framework. We will continue to monitor the results of our efforts to determine how well they help to improve the quality and completeness of incoming submissions and therefore, our processing efficiencies.

We will maintain the more extensive mentoring system that was introduced last year for new evaluation and screening staff, which will include training exercises. This will give trainees a more complete understanding of the regulatory requirements, earlier in their careers with us. We will also bring about more efficient and consistent decision making on the part of our staff by revising the screening manual.

A longer-term initiative is our work directed to reintroducing amendments to the *Hazardous Materials Information Review Act* and its Regulations. These changes will enable the Commission to modernize and streamline existing processes, accelerate decision making and speed up the process of getting complete and accurate information on hazardous materials to employers and workers. In June 2005, Bill S-40, *An Act to amend the Hazardous Materials Information Review Act* was introduced in the Senate. After hearings by the Standing Senate Committee on Social Affairs, Science and Technology, the Bill was given third reading without opposition and with no amendments. Indeed, Senators attending the hearings were impressed with the unprecedented stakeholder support and described the consultation process as a 'shining example of what can be achieved when stakeholders and government work together for the good of all Canadians'. The Bill died on the Order Paper awaiting second reading in the House of Commons upon the dissolution of Parliament last November.

2. Manage the workload

At the beginning of 2003–2004, detailed claim workload estimates were established, covering a six-year period ending in March 2009. These estimates, when tracked against actual figures, will generally demonstrate the degree to which the resourced capacity of the Commission, as currently funded, is able to keep pace with incoming claim-related workload demands.

The claim workload estimates include certain elements over which the Commission has little or no control, such as the numbers of new claims registered, refilings, withdrawals, etc. By contrast, we must be vigilant in regard to the achievement of output estimates, to ensure that our ability to process claims is managed in an effort to match or surpass our estimated workload capacity. With respect to all these elements, we will undertake a comprehensive variance analysis at the conclusion of each fiscal year, and report on the results.

CLAIM WORKLOAD ESTIMATES – 2003–2004 to 2008–2009								
	2003–2004		2004–2005		2005– 2006	2006– 2007	2007– 2008	2008 – 2009
Carry forward	836		789		691	556	441	386
PLUS								
	Estimate	Actual	Estimate	Actual	Estimate			
New claims	235	283	245	196	245	245	245	245
Refilings	75	56	35	53	90	100	150	200
Subtotal	310	339	280	249	335	345	395	445
MINUS								
Withdrawals	100	161	75	102	70	60	50	50
Claims processed	200	225	300	245	400	400	400	400
Subtotal	300	386	375	347	470	460	450	450
EQUALS								
Balance *	846	789	694	691	556	441	386	381

* Indicates the number of claims remaining to be adjudicated.

March 31, 2005

3. Monitor implementation initiatives under the Globally Harmonized System

Through the new Globally Harmonized System for the Classification and Labelling of Chemicals (GHS), the international community expects to:

- ▶ enhance the protection of humans and the environment by providing an internationally comprehensive system for hazard communication;
- ▶ reduce the need for duplicative testing and evaluation of hazardous chemicals;

- ▶ eliminate the barriers to international trade in chemicals whose hazards have been properly assessed and identified on an international basis;
- ▶ provide a recognized framework for those countries not having an existing system; and
- ▶ promote regulatory efficiency, facilitate compliance, provide better and more consistent information.

The international community has agreed that countries should make the necessary changes to their own legislation and processes to complement the international efforts to make the system operational by 2008. Canada is working toward this goal. While many international GHS issues are being addressed, trade secret protection mechanisms are not intended to be standardized. At present, the means by which trade secret protection and workplace health and safety priorities are balanced differ amongst countries.

The GHS introduction is expected to have a number of impacts on our Commission. These may prove to be relatively minimal or could be fundamental. Therefore, we will continue to work with other government agencies in Canada and with international agencies, to communicate the benefits of the Canadian model that provides trade secret protection while addressing worker health and safety needs. More generally, we will monitor the situation and explore the impact of emerging issues to ensure we understand their implications.

4. Improve the focus on outreach activities and stakeholder liaison

As an organization with a broad stakeholder base and an important mandate, HMIRC is aware of the value of communicating our role to people who deal with workplace health and safety issues. We have developed a communications plan that is directed at people and organizations with a strong interest in WHMIS in workplaces, at the government level and among international agencies. We will continue to act upon this plan in 2006–2007 and respond to any identified gaps by updating the plan and revising our actions. We will continue to attend trade shows and to improve our Web site which is a key communication tool.

As part of our strategy, we will uphold and promote stronger relationships with our health portfolio partners, as well as with other federal departments and agencies. We will also build stronger links to organizations that have WHMIS-related mandates, and we will maintain stakeholder liaison efforts with industry, labour and provincial/territorial OHS agencies and with our industry partners. As a result, we expect to increase awareness of the Commission's role.

5. Enhance management excellence

As a small organization with a limited budget the Commission is highly focused on service delivery and has, over the past number of years, worked hard to develop a coherent, integrated approach to strategic and business planning. This includes working collaboratively with its health portfolio partners, particularly Health Canada, on portfolio and government management issues. As part of its ongoing focus on the effective

management of resources to achieve results, the Commission will continue to adopt the principles of the government's Management Accountability Framework in its day to day operations, including the identification of the data necessary to support effective planning.

Section III Supplementary Information

Organizational Information

Accountability

The President and CEO is appointed by the Governor in Council and has the authority and responsibility to supervise and direct the organization's work on a day-to-day basis. The President is accountable to Parliament through the Minister of Health.

The Council of Governors constitutes the key element of the Commission's governance structure, acts as an advisory body and provides strategic advice and guidance to the Commission. The Council consists of 18 members: two representing workers, one representing suppliers and one representing employers, one representing the federal department of Labour, and not fewer than four and not more than 13 governors to represent the governments of the 10 provinces and the three territories as specified in subsection 28(2) of the *Hazardous Materials Information Review Act*. Each governor is appointed by the Governor in Council to hold office for up to a three-year term. The Council is headed by a chairperson chosen by the governors for a term of one year. The Council is responsible for making various recommendations to the Minister of Health, including changes to the regulations respecting the Commission's fee structure, the procedures for reviewing claims for exemption and the appeal procedures.

Most Council members concurrently represent other occupational and safety organizations, and thus are part of the existing multi-jurisdictional occupational health and safety network.

The Vice-President of Operations directs the work of the MSDS Compliance, Screening and Client Services divisions.

The Vice-President of Corporate Services and Adjudication directs the work of the Corporate Services, Regulatory Affairs and Appeals, and Communications divisions.

HMIRC's Organizational Chart

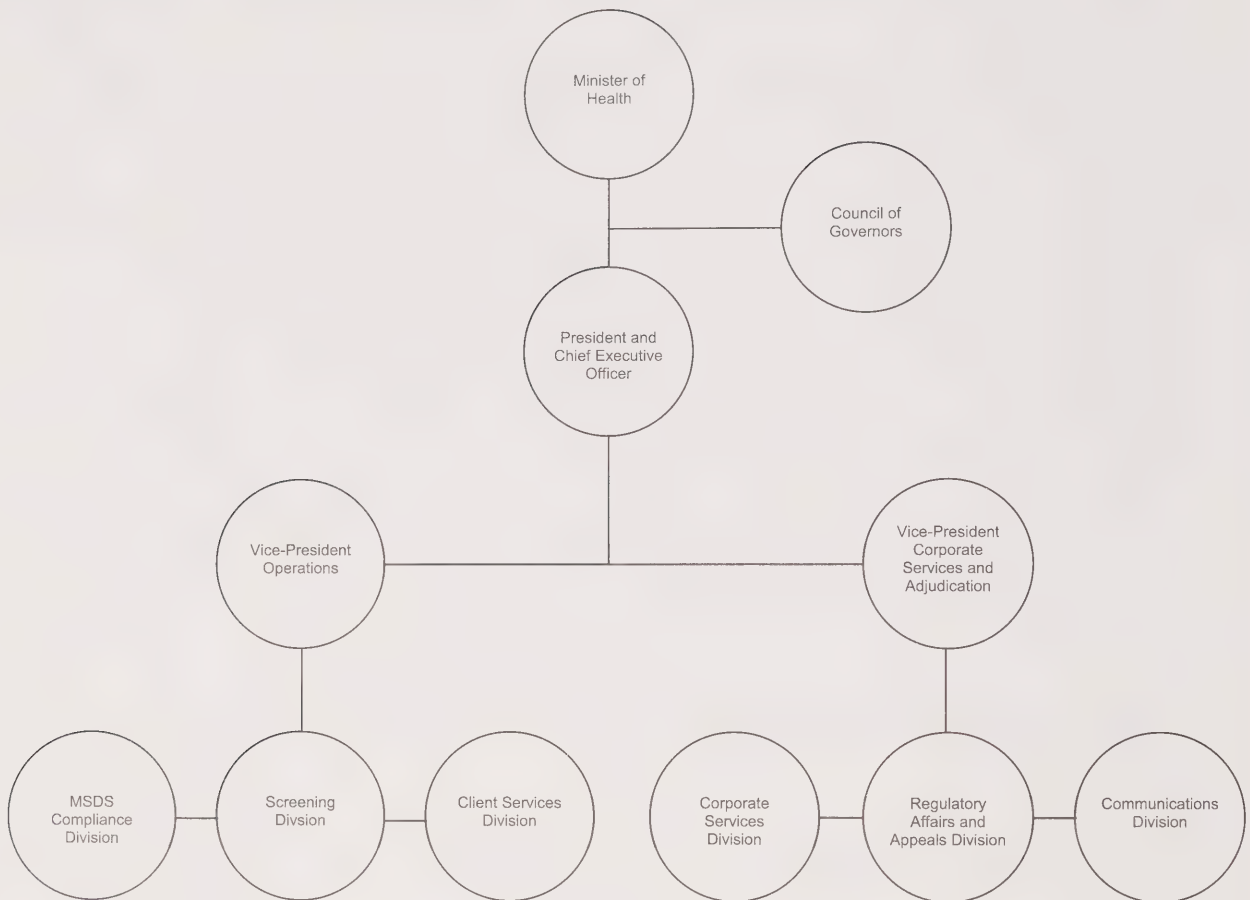


Table 1: Planned Spending and Full-Time Equivalents

<i>(\$ thousands)</i>	Forecast Spending 2005–2006	Planned Spending 2006–2007	Planned Spending 2007–2008	Planned Spending 2008–2009
Claims Exemption Process	3,391	3,512	3,518	3,518
Budgetary Main Estimates (gross)	3,391	3,512	3,518	3,518
Non-Budgetary Main Estimates (gross)	—	—	—	—
Less: Respendable revenue	—	—	—	—
Total Main Estimates	3,391	3,512	3,518	3,518
<i>Adjustments:</i>				
Governor General Special Warrant 3 rd period:				
Refund of fees ¹	84	—	—	—
Collective Agreements	94	—	—	—
<i>Total Adjustments</i>	178	—	—	—
Total Planned Spending	3,569	3,512	3,518	3,518
Total Planned Spending	3,569	3,512	3,518	3,518
Less: Non-respendable revenue ²	(570)	(570)	(570)	(570)
Plus: Cost of services received without charge	895	1,215	875	875
Net cost of Program	3,894	4,157	3,823	3,823
Full-Time Equivalents	35	35	35	35

¹ These are refunds of fees collected in prior years from Canadian and international chemical manufacturers and distributors that have since withdrawn their claims for exemption to regulatory requirements of the Workplace Hazardous Materials Information System (WHMIS).

² These are estimated revenues for fees paid by Canadian and international chemical manufacturers and distributors for the registration and review of claims for exemption under WHMIS and its related legislation.

Table 2: Program by Activity

2006–2007						
<i>(\$ thousands)</i>	Budgetary					
Program Activity	Operating	Gross	Net	Total Main Estimates	Adjustments (planned spending not in Main Estimates)	Total Planned Spending
Claims Exemption Process	3,512	3,512	3,512	3,512	–	3,512
Total	3,512	3,512	3,512	3,512	–	3,512

Table 3: Voted and Statutory Items Listed in Main Estimates

2006–2007			
<i>(\$ thousands)</i>	Truncated Vote or Statutory Wording	Current Main Estimates	Previous Main Estimates
Vote or Statutory Item			
25	Program expenditures	3,019	2,897
(S)	Contributions to employee benefit plans	493	494
Total Agency		3,512	3,391

Note: The difference between current and previous estimates results from the collective agreement funding.

Table 4: Net Cost of the Program for the Estimates Year

(\$ thousands)	2006–2007
Total Planned Spending	3,512
<i>Plus: Cost of Services Received without Charge</i>	
Accommodation provided by Public Works and Government Services Canada (PWGSC)	1,020
Contributions covering employers' share of employees' insurance premiums and expenditures paid by TBS (excluding revolving funds)	195
Worker's compensation coverage provided by Social Development Canada	0
Salary and associated expenditures of legal services provided by Justice Canada	0
	4,727
<i>Less: Non-respendable Revenue</i>	(570)
2006–2007 Net cost of the Program	4,157

Table 5: Sources of Non-Respendable Revenue

(\$ thousands)	Forecast Revenue 2005–2006	Planned Revenue 2006–2007	Planned Revenue 2007–2008	Planned Revenue 2008–2009
Hazardous Materials Information Review Commission				
Claim Registration Fees	570	570	570	570
Total Non-respendable Revenue	570	570	570	570

Note: These are estimated revenues for fees paid by Canadian and international chemical manufacturers and distributors for the registration and review of claims for exemption under WHMIS and its related legislation.

Table 6: Resource Requirement by Branch or Sector

2006–2007		
(\$ thousands)	Program Activity Title	Total Planned Spending
Claims Processing	Claims Exemption Process	3,336
Dispute Prevention/Appeals	Claims Exemption Process	176
Total		3,512

Section IV Other Information

For further information:

Mail: Hazardous Materials Information Review Commission
427 Laurier Avenue West, 7th floor
Ottawa, Ontario K1A 1M3

Telephone: 613.993.4331

Facsimile: 613.993.5016

Web site: www.hmirc-ccrmd.gc.ca

E-mail: hmirc-ccrmd@hc-sc.gc.ca

Section IV Autres renseignements

Pour de plus amples renseignements :

Courrier : Conseil de contrôle des renseignements relatifs aux

matières dangereuses

427, avenue Laurier ouest, 7^e étage

Ottawa (Ontario) K1A 1M3

Téléphone : 613.993.4331

Télécopieur : 613.993.5016

Site Web : www.ccrmd-hmirc.gc.ca

Courriel : ccrmd-hmirc@hc-sc.gc.ca

Tableau 4 : Coût net pour le ministère au cours de l'année budgétaire

(milliers \$)		2006-2007	
Dépenses nettes prévues		3 512	
Plus : Services reçus à titre gracieux			
Locaux fournis par Travaux publics et Services gouvernementaux au Canada (TPSGC)		1 020	
Contributions de l'employeur aux primes du régime d'assurance des employés et dépenses payées par le SCT (hors les fonds renouvelables)		195	
Indemnisation des victimes d'accidents du travail assurée par Développement des ressources humaines Canada		0	
Traitements et dépenses connexes liés aux services juridiques fournis par Justice Canada		0	
Moins : Revenus non disponibles		4 727	
		(570)	
Coût net pour le ministère en 2006-2007		4 157	

Tableau 5 : Source de revenus non disponibles

(milliers \$)	Prévisions des dépenses 2005-2006	Dépenses prévues 2006-2007	Dépenses prévues 2007-2008	Dépenses prévues 2008-2009
Conseil de contrôle des renseignements relatifs aux matières dangereuses				
Droits d'enregistrement des demandes de dérogation	570	570	570	570
Total	570	570	570	570

Nota : Il s'agit des revenus estimés pour les droits versés par les fabricants et les distributeurs canadiens et internationaux de produits chimiques pour l'enregistrement et l'examen des demandes de dérogation en vertu du SIMDUT et de sa législation connexe.

Tableau 6 : Besoins de ressources par direction ou secteur

2006-2007			
(milliers \$)	Programme par activité	Total des dépenses prévues	
Traitement des demandes	Processus des demandes de dérogation	3 336	
Prévention des différends/Appels	Processus des demandes de dérogation	176	
Total		3 512	

Tableau 2 : Programme par activité

2006-2007							(milliers \$)
Budgetaire							
Activité de programme	Fonctionnement	Dépenses brutes	Revenus nets	Total Budget pour le principal	Rajustements (dépenses prévues non indiquées dans le Budget principal)	Total des dépenses prévues	
Processus des demandes de dérogation	3 512	3 512	3 512	3 512		3 512	
Total	3 512	3 512	3 512	3 512	-	3 512	

Tableau 3 : Postes votés et législatifs indiqués dans le Budget principal

2006-2007			
(milliers \$)	Poste voté ou législatif	Libellé tronqué pour le poste voté ou législatif	Budget principal actuel
	25	Dépenses de fonctionnement	3 019
	(S)	Contributions aux avantages sociaux des employés	493
			494
			2 897
			Budget précédent
			3 512
			3 391
			Total pour l'Agence

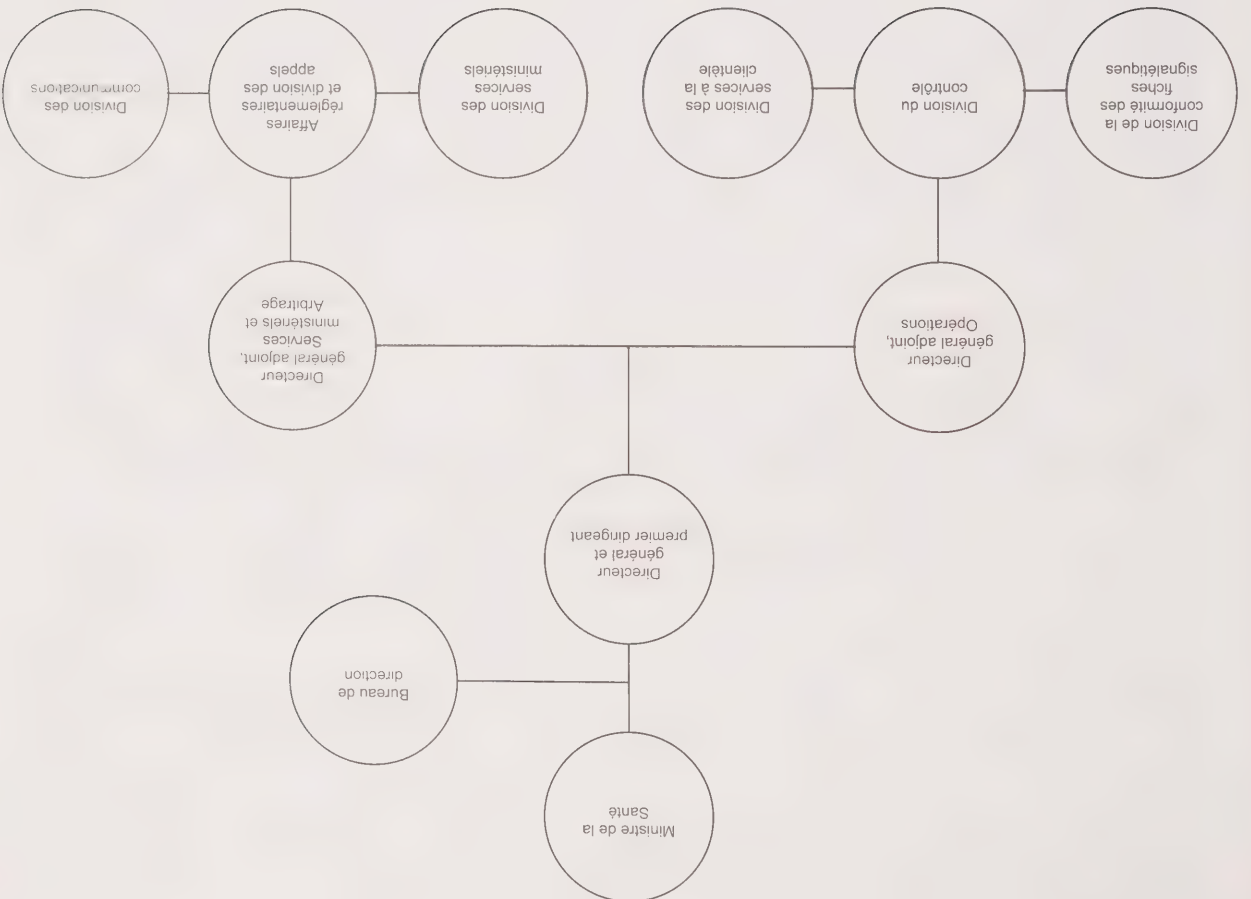
Nota : La différence entre les estimations actuelles et précédentes résulte du financement provenant des conventions collectives.

Tableau 1 : Dépenses prévues du ministère et équivalents
temps plein

(milliers \$)	Prévisions des dépenses 2005-2006	Dépenses prévues 2006-2007	Dépenses prévues 2007-2008	Dépenses prévues 2008-2009
Processus des demandes de dérogation	3 391	3 512	3 518	3 518
Dépenses budgétaires du Budget principal des dépenses (brutes)	3 391	3 512	3 518	3 518
Dépenses non budgétaires du Budget principal des dépenses (brutes)	—	—	—	—
Moins : Revenus disponibles	—	—	—	—
Total du Budget principal des dépenses	3 391	3 512	3 518	3 518
<i>Rajustements :</i>				
Troisième période visée par des mandats spéciaux du gouverneur général :				
Remboursements des droits ¹	84	—	—	—
Conventions collectives	94	—	—	—
<i>Total des rajustements</i>	178	—	—	—
Dépenses nettes prévues	3 569	3 512	3 518	3 518
Dépenses nettes prévues	3 569	3 512	3 518	3 518
Moins : Revenus non disponibles ²	(570)	(570)	(570)	(570)
Plus : Coût des services reçus à titre gratueux	895	1 215	875	875
Coût net du programme	3 894	4 157	3 823	3 823
Équivalents temps plein	35	35	35	35

¹ Il s'agit des remboursements de droits recueillis au cours d'exercices précédents auprès de fabricants et de distributeurs canadiens et internationaux de produits chimiques qui ont retiré depuis lors leurs demandes de dérogation aux exigences réglementaires du Système d'information sur les matières dangereuses utilisées au travail (SIMDUT).

² Il s'agit des revenus estimés pour les droits versés par les fabricants et les distributeurs canadiens et internationaux de produits chimiques pour l'enregistrement et l'examen des demandes de dérogation en vertu du SIMDUT et de sa législation connexe.



Section III Information additionnelle

Information organisationnelle

Imputabilité

Le directeur général et premier dirigeant est nommé par le gouverneur en conseil et il a le pouvoir et la responsabilité de superviser et de diriger le travail quotidien de l'organisme. Il relève du Parlement par l'intermédiaire du ministre de la Santé.

Le Bureau de direction constitue la clé de voûte de la structure de gouvernance du Conseil, agit comme organe consultatif et fournit des conseils stratégiques et une orientation au Conseil. Il est composé de 18 membres : deux représentent les travailleurs, un les fournisseurs et un les employeurs, tandis qu'un autre représente le ministère fédéral du Travail et de quatre à 13 les gouvernements des dix provinces et des trois territoires, tel que précisé au paragraphe 28(2) de la *Loi sur le contrôle des renseignements relatifs aux matières dangereuses*. Chaque membre du Bureau de direction est nommé par le gouverneur en conseil pour un mandat maximal de trois ans. Le Bureau de direction est présidé par un de ses membres que ceux-ci choisissent pour un mandat d'un an. Il est chargé de formuler diverses recommandations au ministre de la Santé, notamment les amendements au Règlement concernant la grille de droits du Conseil et les changements aux modalités d'examen des demandes de dérogation et aux modalités d'appel.

La plupart des membres du Bureau de direction représentent simultanément d'autres organismes de santé et de sécurité au travail et la composition du Bureau de direction reflète donc le réseau panacadien de santé et de sécurité au travail. Le directeur général adjoint de la direction des opérations dirige le travail des divisions de la conformité des FS, du contrôle et des services à la clientèle.

La directrice générale adjointe de la direction des services ministériels et d'arbitrage dirige le travail des divisions des services ministériels, des affaires réglementaires et des appels, ainsi que des communications.

moyen permettant d'équilibrer la protection des secrets commerciaux et les priorités en matière de santé et de sécurité en milieu de travail différent selon les pays.

La mise en œuvre du SGH devrait avoir un certain nombre de répercussions sur notre Conseil, qui pourrait se révéler être relativement minimes ou fondamentales. Nous continuerons à collaborer avec d'autres agences gouvernementales au Canada et avec des organismes internationaux pour communiquer les avantages du modèle canadien qui offre la protection des secrets commerciaux tout en tenant compte des besoins des travailleurs en matière de santé et de sécurité. De façon plus générale, nous surveillerons la situation et nous explorerons l'impact des problèmes naissants pour nous assurer de bien comprendre leurs répercussions.

4. Améliorer l'accent mis sur les activités de diffusion et sur les liens avec les intervenants

En tant qu'organisme ayant une vaste base d'intervenants et un mandat important, le CCRMD est conscient de la valeur de communiquer son rôle aux personnes qui s'occupent des questions de santé et de sécurité en milieu de travail. Nous avons élaboré un plan de communications qui est destiné aux gens et aux organismes fortement intéressés par le SIMDUT dans les milieux de travail, au niveau gouvernemental et au sein des organismes internationaux. Nous continuerons à mettre ce plan en application en 2006-2007 et nous répondrons à toutes les lacunes identifiées en mettant à jour le plan et en révisant les mesures que nous prenons. Nous continuerons d'assister à des foires commerciales et d'améliorer notre site Web, outil indispensable de communications.

Dans le cadre de cette ouverture, nous maintiendrons et favoriserons des relations plus étroites avec nos partenaires du portefeuille de la santé, ainsi qu'avec d'autres ministères et organismes fédéraux. Nous tisserons également des liens plus solides avec des organismes ayant des mandats proches du nôtre, et nous poursuivrons nos efforts en vue d'établir des liens avec nos intervenants auprès de l'industrie, des travailleurs et des organismes provinciaux/territoriaux de santé et sécurité au travail et avec nos partenaires de l'industrie. En conséquence, nous espérons accroître la sensibilisation à l'égard du rôle du Conseil.

5. Accentuer l'excellence en matière de gestion

Étant donné sa taille relativement modeste et son budget restreint, le Conseil est fortement axé sur la prestation des services et a, au cours des dernières années, déployé de gros efforts pour élaborer une approche cohérente et intégrée de la planification stratégique et opérationnelle. Il a notamment collaboré étroitement avec ses partenaires du portefeuille de la santé, en particulier avec Santé Canada, à propos des questions de gestion touchant le portefeuille et le gouvernement. Tout en maintenant l'accent mis sur la gestion efficace des ressources en vue d'atteindre des résultats, le Conseil continuera d'adopter les principes du Cadre de responsabilisation de gestion dans ses opérations quotidiennes, y compris l'identification des données nécessaires pour appuyer une planification efficace.

La communauté internationale a convenu que les pays devraient apporter les changements nécessaires à leurs propres lois et processus pour compléter les efforts déployés à l'échelle internationale en vue de rendre le système opérationnel d'ici 2008. Le Canada travaille à l'atteinte de cet objectif. Pendant que de nombreux problèmes internationaux concernant le SGH sont abordés, les mécanismes entourant la protection des secrets commerciaux ne sont pas destinés à être normalisés. À l'heure actuelle, le

Par le biais du nouveau Système général harmonisé (SGH) de classification et d'étiquetage des produits chimiques, la communauté internationale espère :

- ▶ améliorer la protection des êtres humains et de l'environnement en offrant un système complet de communication des dangers à l'échelle internationale;
- ▶ réduire la nécessité de tester et d'évaluer deux fois les produits chimiques dangereux;
- ▶ supprimer les entraves au commerce international des produits chimiques dont les dangers ont été convenablement évalués et identifiés sur une base internationale;
- ▶ offrir un cadre reconnu aux pays qui n'ont pas de système en vigueur; et
- ▶ promouvoir l'efficacité réglementaire, faciliter la conformité et fournir des renseignements meilleurs et plus cohérents.

3. Surveiller les initiatives de mise en œuvre en vertu du Système général harmonisé

* Indique le nombre de demandes en attente d'une décision

ESTIMATIONS DU VOLUME DES DEMANDES – 2003-2004 à 2008-2009									
Report	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	PLUS		
							789	691	556
MOINS									
	Estimation	Réel	Estimation	Réel	Estimation				
Nouvelles demandes	235	283	245	196	245	245			
Demandes représentées	75	56	35	53	90	100	150	200	
Sous-total	310	339	280	249	335	345	395	445	
EGAL									
Retraits	100	161	75	102	70	60	50	50	
Demandes traitées	200	225	300	245	400	400	400	400	
Sous-total	300	386	375	347	470	460	450	450	
Solde *									
	846	789	694	691	556	441	386	381	

31 mars 2005

permanant des affaires sociales, des sciences et de la technologie, le projet de loi a été adopté en troisième lecture sans opposition et sans amendements. En fait, les sénateurs présents aux audiences ont été impressionnés par l'appui sans précédent accordé par les intervenants et ont décrit le processus de consultation comme un 'exemple brillant de ce qu'on peut réaliser lorsque les parties intéressées et le gouvernement travaillent de concert pour le bien de tous les Canadiens'. Le projet de loi est mort au feuillement, en attente de sa deuxième lecture à la Chambre des communes, au moment de la dissolution du Parlement en novembre dernier.

2. Gérer la charge de travail

Au début de l'exercice 2003-2004, des estimations détaillées du volume des demandes ont été faites pour une période de six ans se terminant en mars 2009. Ces estimations, comparées aux chiffres réels, illustreront généralement dans quelle mesure les ressources du Conseil, telles que financées actuellement, sont capables de suivre le rythme des exigences imposées à sa charge de travail.

Les estimations du volume des demandes comportent certains éléments sur lesquels le Conseil n'a que peu ou pas de contrôle, comme le nombre de nouvelles demandes enregistrées, de demandes représentées, de retraités, etc. Par contre, nous devons faire preuve de vigilance pour ce qui est d'atteindre nos estimations d'extrants, pour nous assurer que notre capacité de traitement des demandes est gérée dans le but d'égaliser ou de dépasser notre charge de travail estimée. En ce qui concerne tous ces éléments, nous entreprendrons une analyse exhaustive de la variance à la fin de chaque exercice financier et nous déposerons un rapport sur les résultats.

Une initiative à plus long terme implique notre travail visant à présenter de nouveau les amendements à la Loi sur le contrôle des renseignements relatifs aux matières dangereuses et à son Règlement. Ces changements permettront au Conseil de moderniser et de rationaliser les processus existants et d'accélérer la prise des décisions ainsi que le processus visant à obtenir des renseignements complets et précis sur les matières dangereuses pour les employeurs et les travailleurs. En juin 2005, le projet de loi S-40, *Loi modifiant la Loi sur le contrôle des renseignements relatifs aux matières dangereuses*, a été déposé au Sénat. Après la tenue des audiences par le Comité sénatorial

révisant le manuel de contrôle. également une prise de décisions plus efficiente et plus cohérente chez nos employés en critères réglementaires, plus tôt durant leur carrière chez nous. Nous provoquerons formation. Cette mesure confèrera aux stagiaires une compréhension plus exhaustive des nouveaux agents d'évaluation et de contrôle, incluant des exercices pratiques de Nous conserverons le système plus vaste de mentorat qui a été lancé l'an dernier pour les mesure il contribueront à améliorer la qualité et l'intégralité des demandes reçues et donc notre efficacité de traitement.

Nous continuerons de surveiller les résultats de nos efforts pour déterminer dans quelle sont pas familiers avec les critères réglementaires du Canada et le cadre du SIMDUT. larges aux demandeurs, en mettant l'accent sur les particuliers et les compagnies plus particulièrement important, consistera à fournir des conseils et des orientations plus service, et nous poursuivrons sur cette lancée en 2006-2007. L'une de ces pratiques, des demandes pour identifier les secteurs cibles de nos efforts visant à améliorer le Nous avons tiré profit de notre expérience et de celle des compagnies qui nous déposent

1. Améliorer les services offerts à nos clients et à nos intervenants

Priorités

Pour atteindre des résultats sans cesse améliorés dans l'ensemble de nos opérations, nous avons identifié cinq priorités spécifiques.

Résultats/Extrants attendus	Indicateurs
► Résolution des problèmes soulevés pendant la phase d'échange de renseignements du traitement des demandes (par ex. prévention des différends)	► nombre de problèmes soulevés et résolus
► Décisions concernant les appels	► nombre d'appels/de décisions

indépendante est alors convoquée pour entendre l'appel et rendre une décision. Nous administrons également un processus de règlement des différends qui complète le processus d'appel en cernant et en réglant les problèmes et les plaintes, si possible, avant qu'un appel devienne nécessaire.

Ressources financières (milliers \$)

2006-2007	3 336	2007-2008	3 342	2008-2009	3 342
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En vertu de cette activité, le CCRMD enregistre les demandes, ce qui permet aux compagnies de vendre et/ou de distribuer leur produit pendant le traitement de la demande. Par la suite, la validité de la demande de dérogation est déterminée d'après les critères contenus dans le *Règlement sur le contrôle des renseignements relatifs aux matières dangereuses* et la fiche signalétique est évaluée pour s'assurer de sa conformité avec les critères du SIMDUT. Les décisions sont prises et publiées dans la *Gazette du Canada*.

Résultats/Extrants attendus	Indicateurs
<ul style="list-style-type: none"> Les fabricants peuvent importer, distribuer et vendre les produits Assignation d'un numéro d'enregistrement Publication des décisions 	<ul style="list-style-type: none"> nombre de demandes enregistrées nombre de plaintes des fournisseurs/demandeurs à propos des retards nombre de décisions publiées temps écoulé entre la réception et l'enregistrement de la demande
<ul style="list-style-type: none"> Les FS sont conformes à la loi Documents d'avis Conformité avec les ordres 	<ul style="list-style-type: none"> nombre de documents d'avis produits degré de conformité des demandeurs aux ordres dans les 75 jours civils accordés

Programme clé

Prévention des différends/Appels

Ressources financières (milliers \$)

2006-2007	176	2007-2008	176	2008-2009	176
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En vertu de cette activité, le CCRMD administre un processus d'appel. Les demandeurs ont 45 jours pour interjeter appel une fois que la décision concernant une demande de dérogation est publiée dans la *Gazette du Canada*. Une commission tripartite

Section II
Analyse par activité du programme

Le Conseil de contrôle des renseignements relatifs aux matières dangereuses a une seule activité. Son plan d'action général comporte cinq plans spécifiques qui abordent les cinq priorités décrites plus loin dans la présente section.

Résultat stratégique Dérogations touchant les secrets commerciaux au sein du SIMDUT qui concilient le droit de l'industrie de protéger les renseignements commerciaux véritablement confidentiels et le droit des employeurs et des travailleurs d'obtenir de l'information complète et précise sur les dangers liés à la santé et à la sécurité que posent les produits chimiques en milieu de travail.

Activité du programme Processus des demandes de dérogation

Ressources financières (milliers \$)

2006-2007	3 512
2007-2008	3 518
2008-2009	3 518

Ressources humaines (Équivalents temps plein)

2006-2007	35
2007-2008	35
2008-2009	35

Dans le cadre de cette activité, le CCRMD enregistre les demandes de dérogation provenant d'un fournisseur ou d'un employeur qui souhaite retenir des renseignements exclusifs importants, décide de la validité de la demande, statue et émet des décisions sur la conformité de la fiche signalétique ou de l'étiquette en rapport avec la demande et gère un processus d'appel de ces décisions.

Résultats attendus

- ▶ La protection de renseignements commerciaux confidentiels valables concernant les produits dangereux des fournisseurs et des employeurs.
- ▶ Un mécanisme pour informer les travailleurs des dangers, pour la santé et la sécurité, de l'exposition à des produits chimiques trouvés dans des produits associés aux demandes de dérogation.
- ▶ Un système qui résout les différends d'une manière juste, efficiente et rentable.

Programme clé

Traitement des demandes

Pour appuyer cette activité clé, nous avons élaboré un plan d'action général pour nous aider à mieux identifier, intégrer et aborder les défis auxquels nous faisons face. Il comporte les cinq priorités que nous décrivons dans la Section II du présent Rapport.

Au cours des dernières années, le Bureau de direction du Conseil a donné des conseils judicieux et des orientations au directeur général, en particulier pendant notre exercice de renouveau. Nous poursuivrons notre collaboration avec le Bureau de direction à titre de partenaires à part entière de cette structure de gouvernance tripartite et afin qu'il nous oriente pour continuer à exécuter notre mandat et pour assurer le maintien de notre pertinence à l'égard des préoccupations de nos intervenants.

Les besoins en ressources humaines représentent un autre centre d'intérêt de notre plan d'action. Par exemple, nous sommes tributaires d'un personnel hautement qualifié dans des domaines scientifiques comme la toxicologie pour examiner les demandes et les FS sur lesquelles les travailleurs et les employeurs se fient pour utiliser convenablement des produits chimiques dangereux en milieu de travail et pour réagir aux cas possibles d'exposition à ces produits chimiques. Au sein d'un petit organisme comme le nôtre, toute pénurie de personnel a une incidence notable sur le rendement.

Plans et priorités du Conseil

À titre de petit organisme doté d'un mandat très spécifique au sein du Système de contrôle des renseignements relatifs aux matières dangereuses, le Conseil de compte de nos liens clairs avec les intervenants et de notre budget limité, et en tenant d'information sur les matières dangereuses utilisées au travail du Canada, et en tenant compte de nos liens clairs avec les intervenants et de notre budget limité, le Conseil de contrôle des renseignements relatifs aux matières dangereuses est constamment à l'affût des problèmes qui peuvent affecter son fonctionnement. Nous savons que certains facteurs sont imprévisibles. Par exemple, nous ne pouvons pas prévoir avec une grande précision le nombre de demandes de dérogation que les fabricants de produits chimiques, les importateurs et les fournisseurs présenteront à des fins d'examen et de décisions. Nos ressources sont également mises à l'épreuve par la nécessité de satisfaire des critères accrus en matière de rapports de gestion dans le cadre de l'engagement d'améliorer l'imputabilité au sein du gouvernement. Toutefois, nous avons été proactifs en identifiant des problèmes à propos desquels nous pouvons prendre et nous prenons vraiment des mesures.

Entre 1998 et 2002, nous avons entrepris et réalisé un exercice de renouveau pour améliorer notre fonctionnement et nos relations avec nos intervenants. Nous avons réduit la paperasserie pour les demandeurs, amorcé des activités de prévention des différends et de diffusion et aussi élargi les services aux intervenants. En conséquence, nous sommes devenus un organisme davantage axé sur les services qui a amélioré la qualité, la promptitude et la rentabilité de ses extrants et de ses activités. Par exemple, nous avons réussi à réduire notre arriéré de demandes en attente d'une décision de 956 en mars 2002 à 645 au 31 janvier 2006. Toutefois, les volumes toujours élevés de nouvelles demandes commencent sérieusement à remettre en question notre capacité de maintenir à un niveau raisonnable le nombre de demandes en attente d'une décision.

Le Conseil exécute son travail en fonction des cinq priorités suivantes :

- ▶ améliorer les services offerts à nos clients et à nos intervenants;
- ▶ gérer la charge de travail;
- ▶ surveiller la mise en œuvre des initiatives en vertu du Système général harmonisé;
- ▶ améliorer l'accent mis sur les activités de diffusion et sur les liens avec les intervenants; et
- ▶ accentuer l'excellence en matière de gestion.

Ces priorités appuient l'activité clé du Conseil, à savoir le processus des demandes de dérogation, qui appuie à son tour notre résultat stratégique.

Dans le cadre de cette activité, nous enregistrons, traitons et statuons sur les demandes de dérogation concernant des secrets commerciaux dans le cadre du SIMDUT, ce qui aboutit à un équilibre entre le droit de l'industrie de protéger les renseignements commerciaux confidentiels et le droit des travailleurs d'être informés sur les dangers posés par les produits chimiques au travail.

QUALITÉ et CONSTANCE – dans notre capacité à rendre des décisions précises, pertinentes, fiables, compréhensibles, prévisibles et exactes, tout en garantissant une application cohérente et ferme de la réglementation.

COMPÉTENCE et RESPECT – dans notre capacité à fournir des services reposant sur un niveau élevé de savoir, de connaissances et de compétences scientifiques et techniques et à démontrer du respect et du professionnalisme à l'égard de toutes les personnes qui communiquent avec le Conseil.

PROTECTION DES RENSEIGNEMENTS CONFIDENTIELS – dans notre capacité à conserver et à traiter les secrets commerciaux de nos demandeurs.

Aperçu

Notre mandat est de fournir un mécanisme pour protéger les secrets commerciaux des compagnies qui fabriquent et/ou fournissent des matériaux dangereux et d'informer avec exactitude les employés canadiens qui travaillent avec ces produits des risques intrinsèques en matière de santé et sécurité.

Ressources financières (milliers \$)

2006-2007	3 512	2007-2008	3 518	2008-2009	3 518
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Ressources humaines (Équivalents temps plein)

2006-2007	35	2007-2008	35	2008-2009	35
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Activité de l'organisme (milliers \$)

	Type	Dépenses prévues			
		2006-2007	2007-2008	2008-2009	
Activité 1 Processus des demandes de dérégation	Permanente	3 512	3 518	3 518	

- régler les plaintes et les différends, en vertu de la loi ou par d'autres méthodes, avec impartialité, équité et promptitude.

Objectifs

Le CCRMD a pour objectifs :

- de se livrer à des activités qui rapportent des dividendes maximums aux travailleurs en matière de santé et de sécurité, tout en minimisant l'impact et le coût pour les normes et les pratiques de l'industrie;
- d'améliorer ses processus et ses programmes à l'aide des rétroactions de nos clients et de nos intervenants;
- d'atteindre de façon constante les normes de service établies;
- d'instaurer un climat de communication efficace pour prévenir les différends;
- d'utiliser un éventail de mécanismes pour résoudre de façon efficace les différends qui surgissent;
- d'orienter le fonctionnement de ses programmes de base par le biais d'un cadre stratégique global, avec la contribution des intervenants;
- de recouvrer les coûts de traitement des demandes de dérogation en matière de divulgation des secrets commerciaux selon la politique applicable;
- d'acquérir une bonne visibilité et une vaste reconnaissance pour le travail accompli; et
- de s'assurer que ses employés adoptent une approche axée sur la clientèle.

Valeurs et principes directeurs

Le CCRMD reconnaît qu'une amélioration continue est cruciale pour conserver une certaine pertinence et pour fournir un rendement efficace et efficace ainsi qu'un service de qualité. Nous avons identifié les valeurs et les principes directeurs qui favorisent une amélioration continue de nos opérations.

ÉQUITÉ – dans notre capacité à fournir des services et à assumer les fonctions qui nous sont confiées par la loi.

PROMPTITUDE – dans notre capacité à rendre des services dans des délais établis et raisonnables.

ACCESSIBILITÉ et TRANSPARENCE – dans notre capacité à fournir des renseignements et des services simplement et clairement, par le biais de politiques et de procédures compréhensibles pour tous et chacun.

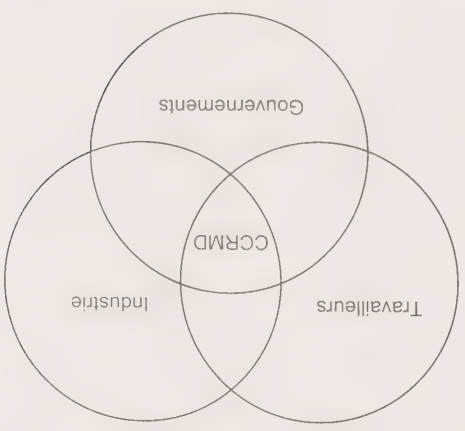
RESPONSABILITÉ – dans notre capacité à proposer des instruments de réglementation sur la base d'une analyse rigoureuse des coûts et des avantages et à répondre de nos programmes et des incidences de nos décisions, tout en fournissant des services rentables à toutes les parties concernées.

Un partenariat modèle entre les principaux intervenants dans tous les secteurs de compétence

Le CCRMD traite avec de nombreux intervenants dans le cadre du SIMDUT :

- les organisations syndicales et les travailleurs;
- les fournisseurs de l'industrie des produits chimiques;
- les employeurs ayant des programmes du SIMDUT en milieu de travail; et
- les agences gouvernementales fédérales, provinciales et territoriales ayant des responsabilités dans le cadre du SIMDUT.

À titre d'organisme indépendant, le Conseil est un modèle de consultation, de consensus et de coopération entre l'industrie, les travailleurs et les gouvernements. Nos efforts d'arbitrage doivent aboutir à un juste équilibre entre le droit des travailleurs de savoir et celui des fournisseurs et des employeurs de protéger les renseignements commerciaux confidentiels. Nous apportons une contribution tangible à la santé et à la sécurité des travailleurs et nous constituons un partenaire stratégique pour l'industrie et les employeurs. Nos travaux appuient également les gouvernements fédéral, provinciaux et territoriaux lors de l'exécution de leurs activités réglementaires en matière de santé et de sécurité au travail, ce qui fait du CCRMD l'un des très rares organismes d'arbitrage qui représentent plusieurs paliers de gouvernement au Canada.



Structure de gouvernance

La structure de gouvernance du CCRMD est un modèle de collaboration. Notre Bureau de direction fournit des conseils stratégiques et des orientations au Conseil et formule des recommandations au ministre de la Santé. Il est composé d'un maximum de 18 membres, deux représentant les travailleurs, un les fournisseurs et un les employeurs, un le ministère fédéral du Travail et de quatre à treize membres représentant les gouvernements provinciaux et territoriaux chargés de la santé et de la sécurité au travail.

Le directeur général et premier dirigeant supervise et dirige le travail du Conseil. Il relève du Parlement par l'intermédiaire du ministre de la Santé.

Vision

Le CCRMD a défini sa vision comme suit :

- prendre des décisions reposant sur des principes scientifiques sains et sur des règlements, et éprouver de la fierté à être un organisme professionnel quasi-judiciaire à la recherche d'approches créatives et progressistes visant à améliorer la sécurité en milieu de travail; et

- de convoquer des commissions indépendantes, composées de représentants des travailleurs, des fournisseurs ou des employeurs, pour entendre les appels interjetés par des demandeurs ou des parties touchées au sujet des décisions et des ordres rendus.

Mission

Le CCRMD a pour mission :

- d'assurer l'équilibre entre le droit de l'industrie de protéger les renseignements commerciaux confidentiels et le droit des employeurs et des travailleurs de connaître les matières dangereuses auxquelles ils sont exposés au travail;
- de fournir un mécanisme touchant les renseignements commerciaux confidentiels au sein du SIMDUT; et
- de régler les plaintes et les différends avec impartialité, équité et promptitude par les moyens prévus dans la loi ou à l'aide d'autres méthodes.

Le travail du Conseil

Si un fournisseur ou un employeur souhaite retenir de l'information qu'il estime constituer un secret commercial, il doit déposer auprès du Conseil une demande de dérogation à l'obligation de divulguer cette information en vertu du SIMDUT. Nos agents de contrôle examinent ces demandes d'après les critères qui sont énoncés dans :

- les règlements fédéraux concernant les fournisseurs de produits chimiques et les employeurs sous juridiction fédérale; ou
- les règlements provinciaux ou territoriaux concernant les employeurs sous leur juridiction;

et décident ensuite de leur validité. Ce processus implique une communication pour éviter ou résoudre les différends.

Dans le cadre de ce processus d'examen des demandes, nos évaluateurs scientifiques jouent un rôle clé en matière de santé et de sécurité. Ils examinent l'intégralité et l'exacitude de tous les renseignements touchant la santé et la sécurité fournis sur les FS et les étiquettes associées à une demande de dérogation, pour chaque ingrédient dangereux. Lorsque nos évaluateurs scientifiques identifient des renseignements manquants ou incorrects, ils donnent des conseils aux agents de contrôle qui émettent alors des ordres officiels exigeant les changements nécessaires.

Sur demande, nous répondons également à tous les besoins d'information des fonctionnaires fédéraux, provinciaux et territoriaux chargés de la santé et de la sécurité, au sujet des demandes de dérogation, en vue d'administrer et d'assumer leurs obligations en vertu du SIMDUT.

Contexte

Les travailleurs, l'industrie et le gouvernement s'entendent sur l'importance de réduire les maladies et les blessures dues aux matières dangereuses dans les milieux de travail canadiens. Le Système d'information sur les matières dangereuses utilisées au travail (SIMDUT), un ensemble de lois, de règlements et de procédures, a été créé en 1987 en vue d'atteindre cet objectif.

Le SIMDUT exige des fournisseurs – incluant les fabricants, les importateurs et les distributeurs – qu'ils communiquent les renseignements sur les dangers des substances chimiques produites ou utilisées au travail au Canada. Il impose l'étiquetage de sécurité pour les contenants de certains produits désignés en vertu des règlements fédéraux et oblige les fournisseurs de ces produits à fournir des FS.

Parmi les renseignements exigés, la FS de chaque produit énumère tous les ingrédients dangereux qu'il contient, les propriétés toxicologiques, toutes les précautions à prendre lors de son usage ainsi que les premiers soins requis en cas d'exposition au produit. Les employeurs doivent communiquer cette information aux employés et mettre sur pied des programmes de formation et d'éducation des travailleurs.

Lorsque les travailleurs, l'industrie et les gouvernements ont accepté de créer le SIMDUT, ils ont reconnu la nécessité d'équilibrer :

- ▶ les droits des travailleurs et des employeurs de disposer de renseignements touchant la santé et la sécurité; et
- ▶ les droits des fournisseurs de produits chimiques de protéger les renseignements commerciaux confidentiels, comme par exemple les secrets commerciaux.

La Loi sur le contrôle des renseignements relatifs aux matières dangereuses et son Règlement offrent le mécanisme visant à créer cet équilibre par le biais du Conseil de contrôle des renseignements relatifs aux matières dangereuses (CCRMD). Notre Conseil est un organisme indépendant doté d'un rôle quasi-judiciaire qui appuie les responsabilités du SIMDUT et soutient les intérêts des gouvernements fédéral, provinciaux et territoriaux, des travailleurs, des employeurs et de l'industrie des produits chimiques.

Mandat

La Loi sur le contrôle des renseignements relatifs aux matières dangereuses donne à notre Conseil le mandat :

- ▶ d'enregistrer les demandes de dérogation et de leur attribuer des numéros d'enregistrement;
- ▶ de statuer et de rendre des décisions sur la validité des demandes de dérogation, conformément aux critères réglementaires prescrits;
- ▶ de rendre des décisions quant à la conformité des FS et des étiquettes conformément aux exigences du SIMDUT; et

Tableau de concordance de l'Architecture des activités de programme (APP)

En juin 2005, le Conseil a soumis au Secrétariat du Conseil du Trésor un amendement visant à changer le titre de son résultat stratégique en vue de mieux refléter le mandat du Conseil prescrit par la loi : la protection des renseignements commerciaux confidentiels et la protection des employés et des travailleurs grâce à la précision des fiches signalétiques (FS).

Résultat stratégique 2006-2007		<p>Dérogations à l'obligation de divulguer les secrets commerciaux dans le cadre du Système d'information sur les matières dangereuses utilisées au travail.</p>	<p>Dérogations touchant les secrets commerciaux au sein du SIMDUT qui concilient le droit de l'industrie de protéger les renseignements commerciaux véritablement confidentiels et le droit des employeurs et des travailleurs d'obtenir de l'information complète et précise sur les dangers liés à la santé et à la sécurité que posent les produits chimiques en milieu de travail.</p>
Ancien titre – 2005-2006	Nouveau titre – 2006-2007		

SIMDUT

Déclaration de la direction

Je soumetts, en vue de son dépôt au Parlement, le *Rapport sur les plans et les priorités* (RPP) de 2006-2007 du Conseil de contrôle des renseignements relatifs aux matières dangereuses.

Le présent document a été préparé conformément aux principes de présentation des rapports énoncés dans le *Guide de préparation de la Partie III du Budget des dépenses 2006-2007 : Rapports sur les plans et les priorités et Rapports ministériels sur le rendement* :

- Il est conforme aux exigences précises de déclaration figurant dans les lignes directrices du Secrétariat du Conseil du Trésor;
- Il est fondé sur la structure de responsabilisation approuvée du ministère, telle qu'elle est indiquée dans sa Structure des ressources et des résultats de gestion;
- Il présente une information cohérente, complète, équilibrée et fiable;
- Il fournit une base pour la reddition de comptes à l'égard des résultats obtenus avec les ressources et les autorisations qui lui sont confiées;
- Il rend compte de la situation financière en fonction des chiffres des dépenses prévues approuvées provenant du Secrétariat du Conseil du Trésor dans le RPP.

Weldon Newton
Directeur général et premier dirigeant

feuilleton à la dissolution du Parlement. Les amendements proposés sont importants pour le Conseil, ses clients et ses intervenants, et mèneront à terme nos engagements pris durant le processus de renouvellement en vue d'améliorer la prestation de nos services, tout en rendant nos activités plus transparentes et plus imputables. Ces amendements réduiront le temps nécessaire pour examiner les demandes de dérogation, accéléreront la correction des renseignements dont les travailleurs ont besoin pour manipuler les matières dangereuses en toute sécurité et hâteront le traitement des appels lorsque les décisions du Conseil seront contestées. Ils réduiront le fardeau administratif imposé tant à l'industrie qu'au Conseil. Cela permettra aux travailleurs d'avoir accès plus tôt à des renseignements complets et précis sur la maintenance sécuritaire des matières dangereuses. Ces mesures ne peuvent qu'avoir des incidences positives sur la sécurité en milieu de travail.

Le Conseil respectera également ses priorités énoncées dans le présent plan. Conformément à nos estimations pluriannuelles de la charge de travail, notre arriéré de demandes a été réduit. Cependant, notre capacité de suivre le rythme du volume élevé de demandes que nous recevons continuellement est remise en question. Les informations, les conseils et les orientations destinés aux demandeurs demeureront en point de mire de nos efforts, surtout auprès des particuliers et des entreprises qui ne sont pas familiers avec les critères réglementaires du Canada. Nous poursuivrons des activités de diffusion pour nous assurer que le public et les intervenants comprennent bien le mandat du Conseil ainsi que ses liens et ses incidences en matière de santé et de sécurité au travail.

Nous reconnaissons l'importance et la nécessité d'adopter une approche efficace au niveau de la collaboration avec les programmes fédéraux, provinciaux et territoriaux en matière de santé et de sécurité au travail. De fait, nous avons déjà établi et nous continuerons à favoriser une relation de travail solide avec nos partenaires du portefeuille de la santé, y compris avec les autres ministères et organismes fédéraux.

Le Conseil continuera d'adopter les principes du Cadre de responsabilisation de gestion (CRG) dans notre culture gestionnelle et nos opérations quotidiennes. Ceci nous permettra de continuer à promouvoir la gestion efficace des ressources et la prise efficiente de décisions tout en renforçant l'importance des valeurs véhiculées dans la fonction publique, de l'éthique, de l'apprentissage et de l'innovation, qui constituent des éléments essentiels en vue d'obtenir les résultats qui seront communiqués aux Canadiens et aux Canadiennes et d'élaborer notre programme et nos politiques.

Comme les années passées, le prochain exercice financier promet d'être passionnant et j'ai hâte de travailler avec les membres de mon Bureau de direction qui représentent collectivement tous les clients et tous les intervenants. Leur appui indéfectible est primordial pour réussir à exécuter les trois volets de notre mandat.

Weldon Newton
Directeur général et premier dirigeant

Section I

Message du directeur général

Le Conseil de contrôle des renseignements relatifs aux matières dangereuses est un organisme quasi-judiciaire indépendant qui est intégré dans le portefeuille de la santé. Nos clients et nos intervenants représentent les fabricants de l'industrie, les employeurs, les travailleurs et les gouvernements fédéral, provinciaux et territoriaux. Le mandat du Conseil comporte trois volets. Premièrement, nous protégeons les véritables secrets commerciaux au nom de l'industrie des produits chimiques. Deuxièmement, nous examinons, au chapitre de la santé et de la sécurité, la documentation relative au produit dangereux qui fait l'objet du secret commercial. Troisièmement, nous offrons un processus d'appel permettant de contester les décisions rendues par le personnel du Conseil. Autrement dit, le mandat du Conseil vise à trouver un juste équilibre entre les droits de l'industrie de protéger ses secrets commerciaux et les droits des utilisateurs de connaître les incidences des produits sur la santé et la sécurité. Lors de l'exécution de nos tâches et de nos fonctions, nous nous efforçons d'établir un lien de confiance et de respect avec nos clients et nos intervenants. Il est donc primordial pour nous de remplir notre mandat avec objectivité, neutralité et transparence. Le milieu dans lequel nous œuvrons est complexe, international et multijuridictionnel, car il implique la législation fédérale, provinciale et territoriale.

Pour les fournisseurs et les employés de l'industrie des produits chimiques qui mentionnent que les secrets commerciaux constituent un facteur crucial du succès de leur entreprise, la valeur économique des renseignements commerciaux confidentiels associés aux demandes de dérogation qu'ils présentent est considérable. Cela inclut des cas dans lesquels la formulation du secret commercial peut être le résultat d'efforts coûteux de recherche et développement. Pour les demandes traitées par le Conseil en 2004-2005, et d'après les renseignements fournis par les demandeurs, l'avantage économique collectif résultant de la protection des renseignements commerciaux déclarés confidentiels a été estimé à environ 400 millions \$.

Même si l'innovation et la compétitivité sont primordiales pour la prospérité d'une industrie, il est tout aussi important d'obtenir un équilibre convenable entre le droit de retenir des renseignements commerciaux confidentiels et le droit des travailleurs d'être totalement et adéquatement informés de la façon de manipuler et d'utiliser en toute sécurité les produits contrôlés associés aux demandes de dérogation. Les cas de non-conformité (publiés chaque année) constatés par le Conseil dans le cadre de son examen, prescrit par la loi, de la documentation pertinente en matière de sécurité démontrent la nécessité de réaliser cet équilibre car le Conseil émet des ordres officiels, énonçant les mesures correctives que doivent prendre les demandeurs pour presque toutes les demandes de dérogation. En 2004-2005, des ordres ont été émis en vue de faire corriger 2 103 inexactitudes.

Au cours du prochain exercice financier, nous allons nous efforcer d'obtenir des appuis pour déposer à nouveau une *Loi modifiant la Loi sur le contrôle des renseignements relatifs aux matières dangereuses*, soit l'ancien projet de loi S-40, qui est mort au

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Conseil de contrôle des renseignements
relatifs aux matières dangereuses

Hazardous Materials Information
Review Commission

Conseil de contrôle des renseignements relatifs aux matières dangereuses

2006-2007

Rapport sur les plans et les priorités

Tony Clement
Ministre de la Santé

Canada

Les documents budgétaires

Chaque année, le gouvernement établit son budget des dépenses, qui présente l'information à l'appui des autorisations de dépenser demandées au Parlement pour l'affectation des fonds publics. Ces demandes d'autorisations sont présentées officiellement au moyen d'un projet de loi de crédits déposé au Parlement. Le budget des dépenses, qui est déposé à la Chambre des communes par le président du Conseil du Trésor, comporte trois parties :

Partie I – Plan de dépenses du gouvernement présente un aperçu des dépenses fédérales et résume les principaux éléments du Budget principal des dépenses.

Partie II – Budget principal des dépenses étaye directement la *Loi de crédits*. Le budget principal des dépenses énonce les autorisations de dépenser (crédits) et les sommes à inclure dans les projets de loi de crédits que le Parlement doit adopter afin que le gouvernement puisse mettre en application ses plans de dépenses. Les Parties I et II du budget des dépenses sont déposées simultanément le 1^{er} mars ou avant.

Partie III – Plan de dépenses du ministère est divisé en deux documents :

1) **Les rapports sur les plans et les priorités (RPP)** sont des plans de dépenses établis par chaque ministère et organisme (à l'exception des sociétés d'État). Ces rapports présentent des renseignements plus détaillés, pour une période de trois ans, sur les principales priorités d'une organisation, et ce, par résultat stratégique, activité de programme et résultats prévus, incluant des liens aux besoins en ressources connexes. Les RPP contiennent également des données sur les besoins en ressources humaines, les grands projets d'immobilisations, les subventions et contributions, et les coûts nets des programmes. Ils sont déposés au Parlement par le président du Conseil du Trésor au nom des ministres responsables des ministères et des organismes qui dépendent des crédits parlementaires et qui sont désignés aux annexes I, I.1 et II de la *Loi sur la gestion des finances publiques*. Ces documents sont habituellement déposés au plus tard le 31 mars, pour renvoi aux comités qui peuvent ensuite faire rapport à la Chambre des communes conformément au paragraphe 81(4) du Règlement.

2) **Les rapports ministériels sur le rendement (RMR)** rendent compte des réalisations de chaque ministère et organisme en fonction des attentes prévues en matière de rendement qui sont indiquées dans leur RPP. Ces rapports sur le rendement, qui portent sur la dernière année financière achevée, sont déposés au Parlement en automne par le président du Conseil du Trésor au nom des ministres responsables des ministères et des organismes qui dépendent des crédits parlementaires et qui sont désignés aux annexes I, I.1 et II de la *Loi sur la gestion des finances publiques*.

Le budget supplémentaire des dépenses étaye directement la *Loi de crédits*. Le budget supplémentaire des dépenses énonce les autorisations de dépenser (crédits) et les sommes à inclure dans les projets de loi de crédits que le Parlement doit adopter afin que le gouvernement puisse mettre en application ses plans de dépenses. Le budget supplémentaire des dépenses est habituellement déposé deux fois par année, soit un premier document au début novembre et un document final au début mars. Chaque budget supplémentaire des dépenses est caractérisé par une lettre alphabétique (A, B, C, etc.). En vertu de circonstances spéciales, plus de deux budgets supplémentaires des dépenses peuvent être publiés au cours d'une année donnée.

Le budget des dépenses, de même que le budget du ministre des Finances, sont le reflet de la planification budgétaire annuelle de l'État et de ses priorités en matière d'affectation des ressources. Ces documents, auxquels viennent s'ajouter par la suite les Comptes publics et les rapports ministériels sur le rendement, aident le Parlement à s'assurer que le gouvernement est dûment comptable de l'affectation et de la gestion des fonds publics.

©Sa Majesté la Reine du chef du Canada, représentée par le ministre des Travaux publics et Services gouvernementaux Canada, 2006

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**Conseil de contrôle des
renseignements relatifs aux
matières dangereuses Canada**

Budget des dépenses
2006-2007

Partie III – Rapport sur les plans et les priorités



Health Canada

2006-2007
Estimates

Part III – Report on Plans and Priorities

Canada

ESTIMATES

The Estimates Documents

Each year, the government prepares Estimates in support of its request to Parliament for authority to spend public monies. This request is formalized through the tabling of appropriation bills in Parliament. The Estimates, which are tabled in the House of Commons by the President of the Treasury Board, consist of:

Part I – The Government Expense Plan provides an overview of federal spending and summarizes the key elements of the Main Estimates.

Part II – The Main Estimates directly support the *Appropriation Act*. The Main Estimates identify the spending authorities (votes) and amounts to be included in subsequent appropriation bills. Parliament will be asked to approve these votes to enable the government to proceed with its spending plans. Parts I and II of the Estimates are tabled concurrently on or before March 1.

Part III – Departmental Expenditure Plans, which is divided into two components:

- 1) **Reports on Plans and Priorities (RPPs)** are individual expenditure plans for each department and agency (excluding Crown corporations). These reports provide increased levels of detail over a three-year period on an organisation's main priorities by strategic outcome(s), program activity(s) and planned/expected results, including links to related resource requirements. The RPPs also provide details on human resource requirements, major capital projects, grants and contributions, and net program costs. They are tabled in Parliament by the President of the Treasury Board on behalf of the ministers who preside over the appropriation dependent departments and agencies identified in Schedules I, I.1 and II of the *Financial Administration Act*. These documents are usually tabled on or before March 31 and referred to committees, which may then report to the House of Commons pursuant to Standing Order 81(4).
- 2) **Departmental Performance Reports (DPRs)** are individual department and agency accounts of results achieved against planned performance expectations as set out in respective RPPs. These Performance Reports, which cover the most recently completed fiscal year, are tabled in Parliament in the fall by the President of the Treasury Board on behalf of the ministers who preside over the appropriation dependent departments and agencies identified in Schedules I, I.1 and II of the *Financial Administration Act*.

Supplementary Estimates directly support an *Appropriation Act*. The Supplementary Estimates identify the spending authorities (votes) and amounts to be included in the subsequent appropriation bill. Parliamentary approval is required to enable the government to proceed with its spending plans. Supplementary Estimates are normally tabled twice a year, the first document in early November and a final document in early March. Each Supplementary Estimates document is identified alphabetically A, B, C, etc. Under special circumstances, more than two Supplementary Estimates documents can be published in any given year.

The Estimates, along with the Minister of Finance's Budget, reflect the government's annual budget planning and resource priorities. In combination with the subsequent reporting of financial results in the Public Accounts and of accomplishments achieved in Departmental Performance Reports, this material helps Parliament hold the government to account for the allocation and management of public funds.

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Health Canada

**2006-2007
REPORT ON PLANS
AND PRIORITIES**

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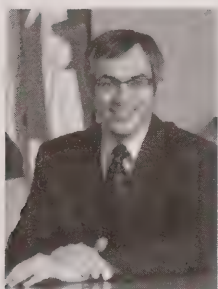
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Overview

1

1.1 Minister's Message



I am very pleased to present Health Canada's 2006-2007 *Report on Plans and Priorities*, which illustrates the initiatives the Department will implement over the next three years to address key government priorities in the area of health.

I am honoured to be given the opportunity to work on behalf of Canadians towards ensuring an effective, cost-efficient and high quality health system. Canadians collectively contribute to our public health care system, and all governments have the responsibility to ensure that it is readily available to all Canadians across the country.

Since we were elected to govern in January 2006, our government has adopted six operating principles in its approach to managing the Health Portfolio: putting the patient first in disease prevention and early detection initiatives; making strategic and evidence-based investments; ensuring alignment of policies and programs across the Health Portfolio; building relationships with partners based on trust and inclusiveness; improving performance and ensuring value for money; and strengthening accountability to Parliament and the public. We have already demonstrated our commitment to these principles by agreeing to compensate Canadians who contracted hepatitis C from the blood system before January 1, 1986 and after July 1, 1990.

As Minister of Health, I have a wide array of responsibilities and priorities. As Canadians have made access to health care one of their top priorities, our government has made the Patient Wait Times Guarantee one of its top priorities. The federal government will deliver on this priority in concert with provinces, territories, stakeholders and other partners. I am encouraged by the desire expressed among my provincial and territorial colleagues for innovative and creative ideas to reduce the wait times faced too often by Canadians.

For this reason, Health Canada will work with provinces, territories and other stakeholders to:

1. establish further evidence-based benchmarks for wait times in the areas of cancer, heart, diagnostic imaging procedures, joint replacements and sight restoration;
2. encourage provincial wait-reduction targets for priority procedures; and
3. provide regular reports to Canadians on progress on wait times.

A Patient Wait Times Guarantee will complement these efforts and build on current and future accomplishments by assuring Canadians that they will receive needed care within appropriate time frames.

Directly linked to reducing wait times, we will make strides on preventing illness and improving disease management across Canada. To this end, we will work with the Public Health Agency of Canada as well as the provinces and territories to implement the *Canadian Strategy for Cancer Control* to improve cancer screening, prevention and coordination through work with major cancer organizations and stakeholders in Canada. We will also focus efforts in the areas of cardiovascular disease, mental illness and mental health, to name but a few. We will also take action on active living and nutrition, starting with the release later this year of the updated Canada's Food Guide. Work will continue to help ensure safer living and working environments and access to and regulation of pharmaceutical products.

With the SARS outbreak in 2003, we have seen how the health threats that arise outside our borders can quickly pose serious threats to the health of Canadians. These threats are of particular concern because they are nearly impossible to predict and have potentially catastrophic consequences. In partnership with the provinces and territories, First Nations organizations, technical experts and other federal and international partners, I am working to

ensure the Government of Canada has an Avian Influenza Plan and a Human Pandemic Influenza Plan in place to mitigate the effects on Canadians in the event of a pandemic. Areas of focus will include avian and pandemic planning, enhanced surveillance capacity, updated quarantine and biosecurity legislation, and infectious disease prevention and control.

In addition to these important areas, we will work on an array of issues fundamental to the health of Canadians. We will strengthen our understanding of the linkages between health and environment, a key concern to Canadians. Health Canada, in partnership with First Nations and Inuit groups, will continue to support sustainable health care services for First Nations on reserve and Inuit people. We will also work with health partners and other federal departments to find new and innovative ways to reduce the health disparities between Aboriginal people and other Canadians. Health research will support the causes and prevention of disease, screening, diagnosis, treatment, support systems and palliative care for a wide range of conditions. For this research, our priority populations are children and youth, seniors and First Nations and Inuit people. We will also improve partnerships and dialogues with international organizations and other countries to help strengthen the Canadian health system.

As our government is determined to provide clear accountability and demonstrate tangible results to Canadians, I have instructed Health Canada to focus on result-based management. While the *2006-2007 Report on Plans and Priorities* includes, for the first time, performance indicators for our programs and services to help measure and report on our progress and value for money, I am looking forward to next year's Report to demonstrate further advances on results-based reporting. We will review investments in priority areas to ensure our efforts yield real results that translate into improvements to health for Canadians.

We have established a bold and ambitious agenda but it is no less than what Canadians expect and deserve from their federal government. Through these comprehensive initiatives I am confident that Canada's health system will provide better access to the care one needs and make Canadians among the healthiest people in the world.

A handwritten signature in dark ink, appearing to read 'Tony Clement', with a stylized, cursive script.


Tony Clement
Minister of Health, and Minister for the Federal
Economic Development Initiative for Northern Ontario

1.2 Management Representation Statement

I submit for tabling in Parliament, the 2006-2007 *Report on Plans and Priorities* (RPP) for Health Canada.

This document has been prepared based on the reporting principles contained in *Guide for the Preparation of Part III of the 2006-2007 Estimates: Reports on Plans and Priorities and Departmental Performance Reports*:

- ◆ It adheres to the specific reporting requirements outlined in the TBS guidelines;
- ◆ It is based on the Department's approved Program Activity Architecture as reflected in its Management, Resources and Results Structures (MRRS);
- ◆ It presents consistent, comprehensive, balanced and reliable information;
- ◆ It provides a basis of accountability for the results achieved with the resources and authorities entrusted to it; and
- ◆ It reports finances based on approved planned spending numbers from the Treasury Board Secretariat in the RPP.



Morris Rosenberg
Deputy Minister of Health

1.3 Summary Information

Raison d'être: Health Canada was established to help the people of Canada maintain and improve their health. We are committed to improving the lives of all Canadians and making this country's population among the healthiest in the world as measured by longevity, lifestyle and effective use of the public health care system.

Financial Resources (in millions of dollars)

2006-2007	2007-2008	2008-2009
3,011.1	2,949.1	2,950.3

Human Resources

2006-2007	2007-2008	2008-2009
8,711	8,773	8,671

Departmental Priorities by Strategic Outcome

Strategic Outcome #1: Strengthened Knowledge Base to Address Health and Health Care Priorities

Program Activity: Health Policy, Planning and Information

Corporate Priority	Planned Spending (in millions of dollars)			Expected Results
	2006-2007	2007-2008	2008-2009	
Working with others to strengthen the efficiency and effectiveness of the publicly-funded health care system (ongoing)	217.3	146.1	144.5	<ul style="list-style-type: none"> Goals and objectives identified for specific strategies and initiatives Knowledge development and transfer of specific health policy issues
Contributing to the improvement of the health of Canadians (ongoing)	20.7	20.6	20.5	
Reducing the risks to the health of the people of Canada (ongoing)	31.7	33.6	32.3	
Strengthening accountability to Parliament and the public (ongoing)	18.7	17.9	17.7	

Strategic Outcome #2: Access to Safe and Effective Health Products and Food and Information for Healthy Choices

Program Activity: Health Products and Food

Corporate Priority	Planned Spending (in millions of dollars)			Expected Results
	2006-2007	2007-2008	2008-2009	
Working with others to strengthen the efficiency and effectiveness of the publicly-funded health care system (ongoing)	102.4	102.4	97.1	<ul style="list-style-type: none"> Access to Safe and Effective Health Products and Food and Information for Healthy Choices
Contributing to the improvement of the health of Canadians (ongoing)	7.3	7.3	6.9	
Reducing the risks to the health of the people of Canada (ongoing)	94.7	94.7	89.8	
Strengthening accountability to Parliament and the public (ongoing)	57.7	54.8	54.3	

Departmental Priorities by Strategic Outcome *(cont'd)*

Strategic Outcome #3: Reduced Health and Environmental Risks from Products and Substances, and Safer Living and Working Environments

Program Activity: Healthy Environments and Consumer Safety

Corporate Priority	Planned Spending (in millions of dollars)			Expected Results
	2006-2007	2007-2008	2008-2009	
Working with others to strengthen the efficiency and effectiveness of the publicly-funded health care system (ongoing)	33.2	33.0	33.1	<ul style="list-style-type: none"> Reduced risks to health and safety, and improved protection against harm associated with workplace and environmental hazards and consumer products (including cosmetics) Reduced health and safety risks associated with tobacco consumption and the abuse of drugs, alcohol and other substances
Contributing to the improvement of the health of Canadians (ongoing)	112.1	111.6	117.2	
Reducing the risks to the health of the people of Canada (ongoing)	92.2	91.8	86.7	
Strengthening accountability to Parliament and the public (ongoing)	52.4	49.8	49.2	

Strategic Outcome #3: Reduced Health and Environmental Risks from Products and Substances, and Safer Living and Working Environments

Program Activity: Pest Control Product Regulation

Corporate Priority	Planned Spending (in millions of dollars)			Expected Results
	2006-2007	2007-2008	2008-2009	
Reducing the risks to the health of the people of Canada (ongoing)	40.2	40.2	36.3	<ul style="list-style-type: none"> Access to safer pesticides Strengthened compliance with PCPA and Regulations Users informed of reduced risk practices Transparency of pesticide regulation Improved regulatory efficiencies and cost effectiveness Informed public and stakeholders
Strengthening accountability to Parliament and the public (ongoing)	11.4	11.0	10.8	

Strategic Outcome #4: Better Health Outcomes and Reduction of Health Inequalities Between First Nations and Inuit and Other Canadians

Program Activity: First Nations and Inuit Health

Corporate Priority	Planned Spending (in millions of dollars)			Expected Results
	2006-2007	2007-2008	2008-2009	
Working with others to strengthen the efficiency and effectiveness of the publicly-funded health care system (ongoing)	49.6	50.1	50.5	<ul style="list-style-type: none"> Strengthened community programs; better health protection; improved primary health care; and access to non-insured health benefits contribute to improved health status of First Nations and Inuit individuals, families and communities.
Contributing to the improvement of the health of Canadians (ongoing)	1,901.4	1,920.4	1,940.0	
Reducing the risks to the health of the people of Canada (ongoing)	46.9	47.4	47.9	
Strengthening accountability to Parliament and the public (ongoing)	121.2	116.3	115.3	

Note: Figures include amounts for other departmental and regional infrastructure costs supporting program delivery.

PART A:

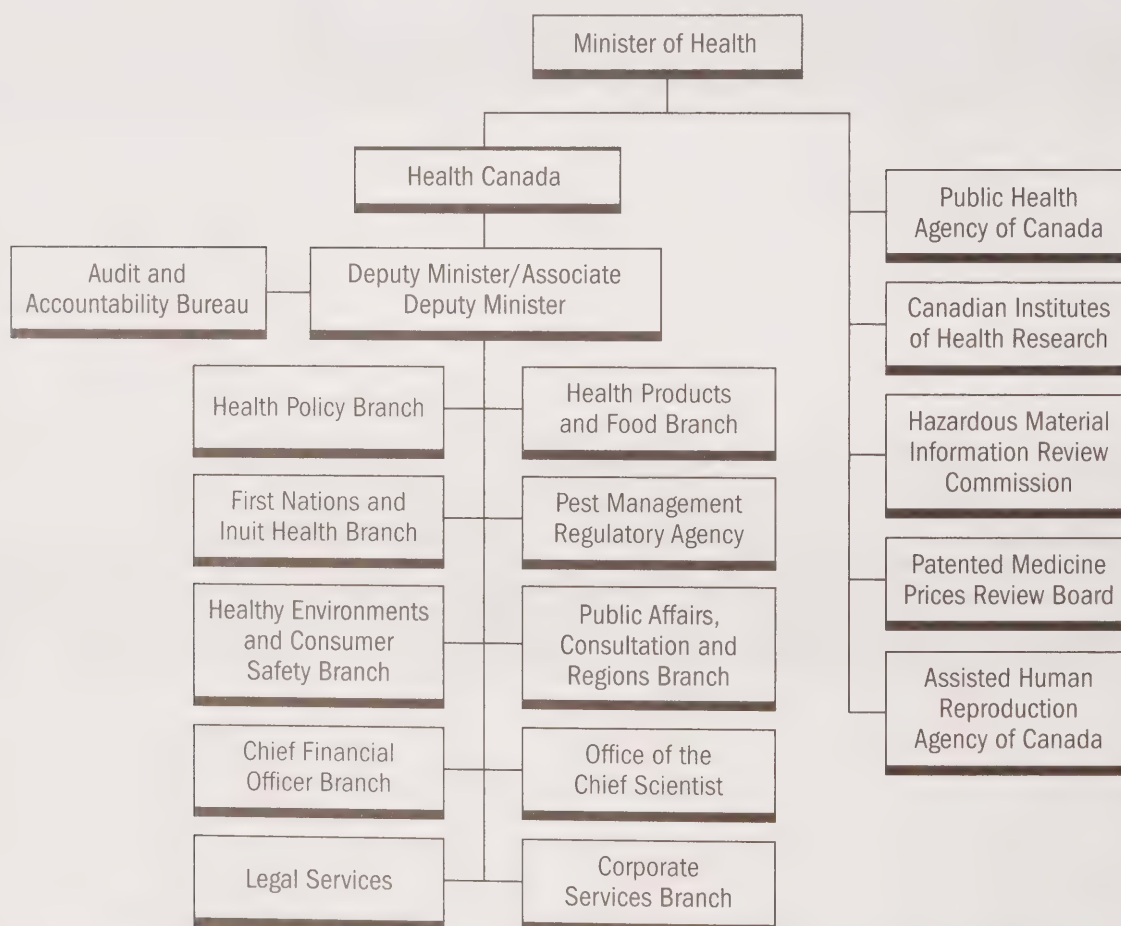
Departmental Overview and Priorities

About Health Canada

Health Canada develops, implements and enforces regulations, legislation, policies, programs, services and initiatives and works with other federal partners, the provinces and territories to maintain and improve the overall health of Canadians. As administrator of the *Canada Health Act*, we ensure that the principles of Canada's universal health care are respected, allowing Canadians to be confident in the services they receive from the public health care system. The Minister of Health is also responsible for the direct administration of another 18 statutes including the *Food and Drugs Act*, the *Pest Control Products Act* and the *Controlled Drugs and Substance Act*.¹

We provide policy leadership and portfolio coordination among our partners in the Government of Canada's Health Portfolio, each of which produces its own Report on Plans and Priorities, namely:

- ♦ the Public Health Agency of Canada;²
- ♦ the Canadian Institutes of Health Research;³
- ♦ the Hazardous Materials Information Review Commission;⁴
- ♦ the Patented Medicine Prices Review Board;⁵ and
- ♦ the new Assisted Human Reproduction Agency of Canada, which came into being January 12, 2006.⁶



Health Canada also contributes grants and contributions to several health organizations such as Infoway, Canadian Institute for Health Information and Canadian Health Services Research Foundations.

Health Canada Planning Framework for 2006-2007 Report on Plans and Priorities

Mission	To help the people of Canada maintain and improve their health			
	Enhance the sustainability of the health system	Sustain health protection and regulations	Contribute to safe environments and products	Facilitate healthy lifestyle choices among Canadians
Corporate Priorities	<ul style="list-style-type: none"> Working with others to strengthen the efficiency and effectiveness of the publicly-funded health care system Contributing to the improvement of the health of Canadians Reducing the risks to the health of the people of Canada Strengthening accountability to Parliament and the public 			
Operating Principles	<ul style="list-style-type: none"> Sound, informed decision-making based on leading edge science Efficient and sustainable resource utilization within legal, ethical and operational frameworks Transparency Cooperation and engagement with provinces, territories, partners and stakeholders Engagement in international health issues 			
Key Areas of Focus for Planning Period	<ul style="list-style-type: none"> Develop the building blocks for establishing a Patient Wait Times Guarantee Develop a Pandemic Response Plan Implement the <i>Canadian Strategy for Cancer Control</i> 			
Strategic Outcomes	Strengthened Knowledge Base to Address Health and Health Care Priorities	Access to Safe and Effective Health Products and Food and Information for Healthy Choices	Reduced Health and Environmental Risks From Products and Substances, and Safer Living and Working Environments	Better Health Outcomes and Reduction of Health Inequalities Between First Nations and Inuit and Other Canadians

Health Canada's Operational Roles

Health Canada employees play key roles in the areas of promoting, protecting and improving the health of Canadians, roles that assist other stakeholders working in the area.

Innovators

As a science-based department, Health Canada employees are innovators, providing leading-edge science, sound policy research, and effective program and service development. Keeping abreast of global developments on diseases enabled Health Canada to play a leading role in Canada's response to the SARS, BSE and West Nile Virus outbreaks.

Knowledge Brokers

Through research, risk assessments and surveillance, Health Canada provides knowledge to Canadians and others working in the health care field to enable them to make sound choices to protect health. The Department also monitors and researches the health threats from environmental factors such as toxic substances, air and water pollution, climate change and other threats. This work fosters sound decision-making and policy-development at all levels to help reduce health risks.

Enablers

In all program areas, Health Canada brings stakeholders together, as well as provides information, research and education. The work of Health Canada enables Canadians to be up-to-date and informed about the issues that can impact their health.

Trustees/Stewards

Health Canada, through the administration of the *Canada Health Act*, aims to ensure that all eligible residents of Canada have reasonable access to medically necessary insured services. The Department's broad regulatory responsibilities to protect Canadians and promote health and safety range from prescription drugs and vaccines to toxic substances, from cardiac pacemakers to natural health products and food, from consumer goods to pesticides.

Proponents of Transparency

All work at Health Canada, from the assessment of products under the *Canadian Environmental Protection Act* to the regulation and approval of thousands of products, is conducted transparently. Health Canada has committed to be accountable in delivering results to Canadians. The public had an opportunity to be involved in consultations on major regulatory initiatives such as the new *Pest Control Products Act* and will continue to be consulted in other areas as part of the Department's consultations framework.

Our Mission and Objectives

Health Canada's mission is to help the people of Canada maintain and improve their health. We strive to accomplish this by promoting and protecting the health of Canadians. In order to achieve this, we will:

- ◆ Enhance the sustainability, innovation and integration of the health system;
- ◆ Sustain health protection and regulations;
- ◆ Contribute to safe environments and products; and
- ◆ Facilitate healthy lifestyle choices among Canadians.

Health Canada and partners helping Canadians make independent, informed choices

The responsibility for promoting, protecting and improving the health of Canadians does not rest with a specific level of government, the medical profession or Canadians themselves. The responsibility is found in an interwoven community of collaborating stakeholders that each contributes to this goal.

Canadians make choices everyday that affect their health and well-being. Environmental, economic and social factors also affect health. Municipal, provincial and territorial governments, health service providers and not-for-profit organizations help ensure community health services are available and provide the health care system that Canadians rely on to

protect and improve their health. The private sector helps develop pharmaceuticals and other health products for Canadians.

In addition to overseeing the *Canada Health Act*, the federal government helps assess risks to human health, sustains health protection efforts, regulates and approves products, and funds health services. Health Canada provides national leadership and expertise in the development of health science and policy. The federal government provides assistance to provincial and territorial governments in the provision of health care services through the Canada Health Transfer.

With respect to health programming and services for First Nations and Inuit, Health Canada supports public health and community health programs on-reserve and in Inuit communities, provides non-insured health benefits coverage regardless of residence, and delivers primary care services in remote and isolated communities to supplement and support the services that provincial, territorial and regional health authorities provide.

Health Canada's Corporate Priorities

Given the environment in which we operate, Health Canada has identified four corporate priorities to respond to the key challenges and opportunities facing the health of Canadians.

These priorities reflect the Government of Canada's direction and commitments as well as our objectives and planned strategic outcomes, which are long-term benefits to Canadians that stem from our overall mission of helping Canadians maintain and improve their health. They represent the differences we wish to make for Canadians. For more information on Health Canada's strategic outcomes, please refer to Section II of this report.

1. Working with others to strengthen the efficiency and effectiveness of the publicly-funded health care system

An efficient and effective health care system is consistently identified as a priority for Canadians. Health Canada will work closely with provincial and territorial governments, as well as health organizations

and other stakeholder groups to examine new and innovative ways to strengthen the efficiency and effectiveness of a universally accessible and equitable publicly funded health care system. We will work with the provinces and territories to develop the building blocks for a Patient Wait Times Guarantee to ensure that Canadians receive the care they need, when they need it.

2. Reducing the risks to the health of the people of Canada

The Department plays a core role in protecting and promoting the health and safety of Canadians.

A potential pandemic such as the Avian Flu presents a great risk to Canadians and global health in general. That is why pandemic preparedness is a priority for Health Canada and why we will continue to work with the Public Health Agency of Canada, other countries and the World Health Organization to increase international cooperation efforts. We are already active in contributing to pandemic readiness by working in the areas of vaccines, multilateral contributions, workplace health and safety, and in emergency preparedness within First Nations and Inuit communities.

The health of Canadians is linked to the health of the environment. We are actively developing integrated approaches to better assess impacts on health and to develop strategies to mitigate known and emerging risks from pollutants and toxic chemicals in air, water, food and products, for example. Protecting and improving the health of vulnerable populations, such as children, seniors, and Aboriginal peoples, from pollutants and chemicals will benefit all Canadians. We are also active in developing regulations, which contribute to protecting the health of Canadians as well as managing the risks and benefits of health products and devices. We continue to strengthen scientific capacity to inform our regulatory responsibilities and monitor new developments.

3. Contributing to the improvement of the health of Canadians

While the majority of Canadians enjoy a high quality of life, there are areas for improvement. Health Canada will

examine and implement new ways to contribute to the improved health of Canadians through collaborative work with other organizations in the Health Portfolio and with other departments towards the Government of Canada's goal of improving the quality of life of Canadians. We are working with the Public Health Agency of Canada to advance efforts on cancer, to support the efforts of stakeholders and to improve screening and prevention.

Health is more than just physical health. Mental health is an integral part of overall well-being and we are working to address mental health and mental illness issues.

A major area of concern continues to be Aboriginal health. While Aboriginal Canadians are living longer, the status of their health continues to lag behind that of other Canadians. Our goal, in collaboration with Aboriginal organizations, Health Portfolio partners, other departments and the provinces and territories, is to deliver efficient and effective health programs, services and initiatives to help improve health outcomes for First Nations and Inuit people.

4. Strengthening accountability to Parliament and the public

Our ability to effectively respond to the health needs of Canadians depends on rigorous management practices to achieve results and ensure value for money. We are reinforcing our commitment to accountability, transparency and sound management of resources by continuing to integrate the principles of modern comptrollership, introducing improved systems and processes for departmental operations and addressing human resource priorities. As part of our continued effort to strengthen our management practices, we will:

- ♦ fortify our management of grants and contributions by ensuring that solid governance structures and administrative processes are in place;
- ♦ improve governance and control of contracts using a Contract Management Framework established on the basic principles of responsibility, accountability, monitoring, oversight and audit;

- ♦ strengthen accountability and stewardship by improving performance measurement and renewing our program evaluation functions;
- ♦ continue to initiate reviews of existing systems and processes in line with Government-wide initiatives;
- ♦ continue the implementation of "The Way Forward", an information technology (IT) project that will consolidate and realign IT resources and position the Department to align with Government of Canada common services initiatives and generate savings;
- ♦ continue the implementation of the new Chief Financial Officer Branch to support the effective management of resources and improve our ability to achieve results across programs through a strengthened Financial Management and Control Framework; and
- ♦ establish a work program to continuously review and improve measurable expected results and performance indicators for the 2007-2008 RPP and beyond.

Health Canada is considered to be a leader within the Government of Canada in implementing the Management Accountability Framework (MAF), a framework that establishes the standards for management accountability in the Government of Canada. Health Canada will continue to build upon this solid foundation by integrating MAF requirements into the management culture of the Department including enhancing a risk-based approach to programs and activities.

Key Areas of Focus for Planning Period

Taking into account the current operating context, the emerging risks to the health of Canadians and the trends in Canadian society, Health Canada will focus on the following key strategic areas for the 2006-2009 planning period:

- 1- **Develop the building blocks for establishing a Patient Wait Times Guarantee** – Reach a shared understanding on ensuring that the health care needs of Canadians are met within a universally

accessible and equitable health care system. Continue working with provinces, territories and other stakeholders to share best practices and innovative initiatives to develop the building blocks for establishing a Patient Wait Times Guarantee.

- 2- **Advance efforts to prepare for a Global Pandemic Outbreak** – Collaborating with other international organizations, departments, provinces, territories and stakeholders to ensure that Canada is well positioned to prepare for and respond to a possible pandemic influenza outbreak.
- 3- **Implement the *Canadian Strategy for Cancer Control*** – Cancer prevention is a priority for the Government of Canada and Health Canada. To this end, we will collaborate with the Public Health Agency of Canada and other organizations to improve cancer screening, prevention and coordination through the Implementation of the *Canadian Strategy for Cancer Control*. The Strategy's main objectives are to reduce the number of new cases of cancer in Canada, to enhance the quality of life of those living with the disease and to reduce the number of premature deaths attributable to cancer.

Operating principles

We are guided by several operating principles in the delivery of our programs and services that help us maximize efficiency in reaching our objective of improving and maintaining the health of Canadians. These operating principles cover the broad spectrum of Health Canada's activities, which range from in-depth policy analysis to scientific research.

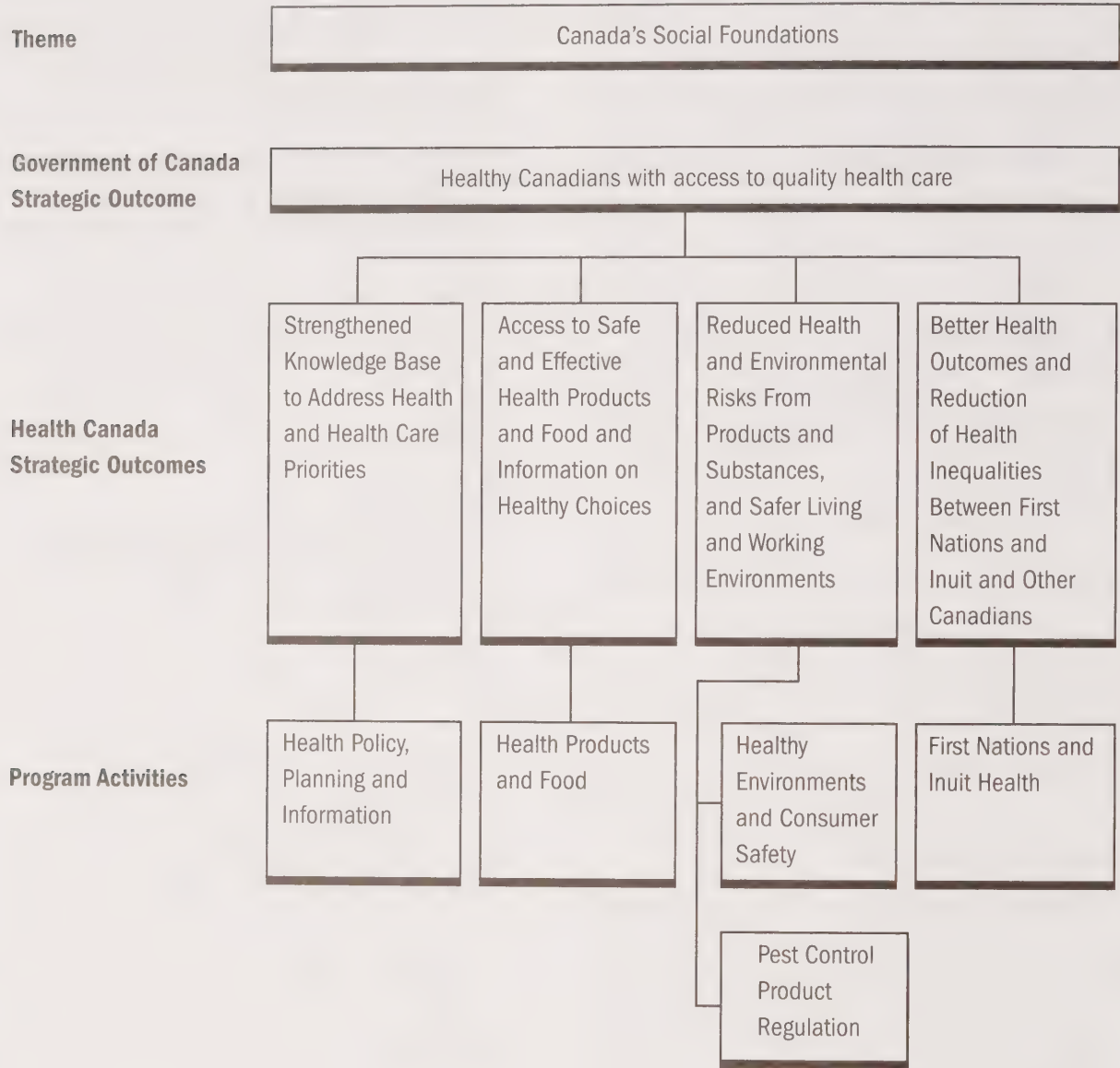
- ♦ **Sound, informed decision-making based on leading edge science**
To bring leadership, coherence and expertise to the overall strategic direction of Health Canada's scientific responsibilities and activities, Health Canada has established the Office of the Chief Scientist (OCS). The OCS will continue to champion

science throughout the Department by coordinating involvement in research and regulatory science within Health Canada and within the federal science and technology community, providing scientific expertise on Health Canada priorities, fostering and facilitating partnerships, promoting and communicating Health Canada science and research, and protecting intellectual property.

- ♦ **Efficient and sustainable resource utilization within legal, ethical and operational frameworks**
We are committed to sound financial management and delivering value for money for Canadians. Through the newly established Chief Financial Officer Branch, we will continue to review processes to optimize the effectiveness and efficiency of the use of our resources and follow central agency direction to ensure management accountability.
- ♦ **Transparency**
We strive to develop and deliver our programs and services in an open and transparent manner by ensuring stakeholders and the public have tangible input to our work through vehicles such as public and stakeholder consultation.
- ♦ **Cooperation and engagement with provinces, territories, partners and stakeholders**
We are committed to working with our partners including provincial and territorial governments, First Nations, Inuit and other Aboriginal organizations, communities, professional associations, consumer groups, universities and research institutes, international organizations, not-for-profit organizations, volunteers and other federal departments and agencies.
- ♦ **Engagement in international health issues**
Increased global mobility enhances the quick spread of disease throughout the world and necessitates our active involvement in the international health community. We are committed to learning from the experiences of other countries and their best practices to minimize the risks to Canadians from global health threats.

Contributing to Government of Canada Strategic Outcomes

The following chart shows how Health Canada's Program Activities align with the Government of Canada's Strategic Outcomes, which were developed by Treasury Board of Canada Secretariat.



Internal Areas of Interest for the Planning Period

Health Canada's Operating Environment

Taking stock of domestic and international trends on a variety of aspects and monitoring emerging risks to the health of Canadians help us gain greater insight into Health Canada's operating environment and develop appropriate policies and initiatives. The description of health risks, opportunities and priorities in Canada five years ago does not match today's description and may be very different from what we will face 5 or 10 years from now.

The Changing Face of Canada

Several changes are taking place in Canadian society that affect policy and program development at Health Canada. It is well known that seniors in Canada are growing in number and living longer, posing new challenges for all aspects of health care. The average Canadian child will have an older mother and fewer siblings. A growing proportion of children are living only with single parents and many face low-income. The health system will continue with a growing proportion of them living only with single parents and many still in poverty, especially those living with only their mother. The health system will continue to face the challenges of compromised health and poor living habits among a significant portion of children living in a level of poverty. Over the coming decade, Canadians are more likely to be living in an urban centre. One-fifth will be a visible minority with roots in Asia or the Middle East and speaking languages other than French or English. A more culturally and ethnically diverse society will continue to increase the demand for alternative therapies and service providers.

Technology Pervasive in Daily Life

Non-traditional disciplines such as biotechnology, artificial transplants and nanotechnology provide exciting potential to address health issues in new ways and dramatically improve the health of many Canadians in the coming decades. These new technologies will continue to challenge us to have the appropriate regulatory science to input into decision-making.

Ethical and social issues will continue to challenge us in new areas including cloning, DNA manipulation and genomics. As advances in science and technology provide more pervasive solutions in the area of health, it will be imperative to continue to integrate science into decision-making by government, industry and individuals.

The market for pharmaceuticals is expanding at an incredible rate and an efficient and effective health system must respond to this by ensuring that Canadians have timely access to safe and effective health products, drugs, food and information.

Evolving Attitudes and Values towards Health

There has been a significant shift in the Canadian public's perception of health care delivery as they are moving from patients to consumers. Because health information is readily available from a number of different avenues, Canadians are more informed than ever about their health and are more willing to discuss sensitive health issues. Canadians are also seeking new ways to have their health concerns addressed and are influenced by factors, which include religion and culture. They are also more engaged in the review of the public health care system and expect governments to discuss these issues in an open and transparent manner.

Deteriorating Physical Environment

The relationship between human health, the environment and the economy is one of the most complex health areas facing governments in Canada. The health of many Canadians will continue to be threatened by air, water and land pollution, climate change and the thinning ozone layer. The health impacts of many environmental risks are not fully understood. The increasing incidence of respiratory illness from poor air quality could grow with the expansion of urban areas and with the advancement of climate change. The health of Aboriginal communities in the North is especially vulnerable to threats posed by significant changes associated with climate change. Health Canada must be prepared to address the public expectation for protection as well as provide more developed information on the adverse health impacts and enforcement that may be required.

Toward Full Globalization

All departments including Health Canada must acknowledge the increasing unrestricted movement of people, goods and services across the globe and the potential consequences that may arise. Governments and the health community are moving beyond the “what if” to a “when” regarding the possible outbreak of a pandemic. The speed with which a pandemic outbreak can spread internationally is alarming. In order to address this potential disaster, Health Canada is actively participating in and leading many international activities such as the Global Health Security Initiative and the APEC Health Task Force.

Canada’s social responsibility to continue to help address the growing health problems faced by the world’s poorer nations will only increase as the life-expectancy gap between developed and less developed countries is increased by HIV-AIDS and other new and re-emerging diseases, poverty, child mortality, injuries, and non-communicable diseases.

There are opportunities to help the international community benefit from our experience in many areas including healthy living, tobacco cessation, early

childhood health along with disease prevention, vaccinations, and access to safe water, to name a few areas.

Emerging Illnesses, Injuries and Diseases in Canada

While the threat of diseases outside our borders are of particular concern, just as alarming is the growing rate of chronic diseases and injuries in Canada. It is estimated that over 60,000 Canadians will die of cancer this year alone and another 79,000 will die from heart disease. Injuries are the leading cause of death for Canadians aged 1 to 44. What makes these figures particularly alarming is that many of these deaths could be prevented. A more informed population is a healthier one and Health Canada with its partners must work to address these issues and provide Canadians with the information they need to make healthy, independent choices.

Health Canada: Collaboration at Work

At Health Canada, we understand the importance of working collaboratively in order to deliver effective programs and services to Canadians. Working with an integrative and horizontal approach allows us to draw on our strengths and provide effective policy and scientific analysis across our many fields of expertise. For this reason, Health Canada is committed to continuing horizontal collaboration for this planning period. There are many ways in which Health Canada collaborates horizontally with partners to improve and maintain the health of Canadians.

♦ Departmentally

At Health Canada, we are organized to respond to the various health needs of Canadians. We collaborate internally to provide the best possible services and programs to Canadians. By doing so, we draw upon not only our strengths but our experiences in any given situation. Examples of departmental horizontal initiatives include tobacco and substance abuse programs, environmental health programs, and research on pesticide residues.

◆ **Across the Health Portfolio**

Providing health policy leadership and coordination within the Health Portfolio gives Health Canada an important role in the development and implementation of programs and services to Canadians. We collaborate horizontally on a number of health initiatives such as our work with the Public Health Agency of Canada (PHAC) on the Healthy Living and Chronic Diseases Strategy as well as on emergency preparedness and response issues. We obtain much of our health and surveillance data from PHAC. Other examples of cross-cutting initiatives include the alcohol strategy, First Nations and Inuit programs, pandemic preparedness and health benchmarks and indicators.

◆ **Across the Government of Canada**

Health Canada recognizes the importance of horizontal initiatives across the Government of Canada. Health Canada is one of the largest departments within the federal government and health is a key consideration in the majority of the government's programs and services. Some of the interdepartmental programs we contribute to include the *Canadian Environmental Protection Act* and Pesticide Regulation, as well as the Service Improvement Initiative and the Sustainable Development Strategy.

◆ **Provincial, Territorial and Aboriginal**

Health Canada works in collaboration with provincial, territorial and Aboriginal organizations on priority areas such as implementing the First Ministers' commitments of the *10-Year Plan to Strengthen Health Care*. Ongoing collaborative efforts will include closing the gap in health outcomes between the general Canadian population and First Nations and Inuit; making timely access to quality care a reality for all Canadians; furthering the development and implementation of the National Pharmaceuticals Strategy; and ongoing efforts in public health and pandemic preparedness. We will also undertake a review of commitments of the 2005 Meeting of First Ministers and Aboriginal Leaders.

◆ **Internationally**

Health Canada is exploring ways to strengthen the regulatory capacity of developing countries, especially as it relates to imported products, through organizations such as the World Health Organization. We will complete the implementation of the International Regulatory Cooperation Strategic Framework, which will ensure effective prioritization and evaluation of regulatory activities. We will establish a Memorandum of Understanding with the Australian Pesticides and Veterinary Medicines Authority in order to increase international cooperation and information sharing. We will implement regulatory cooperation initiatives under Memoranda of Understanding and Mutual Recognition Agreements on information and technical exchanges with Switzerland, U.S., China and Australia, amongst others. Health Canada is also developing an arrangement with the Therapeutic Goods Administration in the Department of Health and Ageing of Australia that allows for the recognition of quality management systems certificates issued for medical devices.

Responding to Human Resources Risks and Challenges

Health Canada's human resources planning process supports the Department's business objectives.

The Department's Annual Report on Human Resources Indicators identifies human resource management issues, risks and challenges and identifies activities that can be taken to address them. For example, the number of employees who are eligible to retire is rising every year. Therefore, managers have been asked, in their Human Resources planning, to identify succession and knowledge transfer strategies to ensure that the Department can continue to manage staff turnover and deliver results for Canadians.

Given the unique human resources issues at the branch level, each Branch human resources plan identifies the risks and activities to address them. An example of this would be that each Branch has developed a strategy to address the gap in the

linguistic capacity of their key feeder groups. As well, given the strong need for renewal in the human resources community the Department is participating in an interdepartmental initiative to recruit and develop qualified human resources professionals. Health Canada is developing a departmental strategic human resources plan that will respond to Branch and Corporate risks, and provide direction for the integrated Human Resources Planning process for 2007-2008.

As a science-based department, Health Canada hires scientists as researchers and regulators, in health-related fields and in pure and applied science. The Department has identified several science specialties as 'shortage areas', and has developed a recruitment strategy and an employment inventory to ensure there is a pool of candidates available to fill vacant positions.

In addition, the Department performs a regular workforce analysis to identify gaps in employment equity representation (women, Aboriginal people, persons with disabilities and members of visible minority groups) and to identify measures that can be taken to address those gaps. As a result, since April 2, 2004, the representation of employees from employment equity groups has met or exceeded the proportion of such individuals available from the labour force.

Finally, in 2006-2007, we will continue to support the implementation of the *Public Service Modernization Act (PSMA)*, a major building block in the Government of Canada's overall strategy to modernize human resources management through training and communication activities, the review of staffing policies and guidelines, the piloting of new staffing tools and approaches, and the implementation of a Staffing Monitoring Action Plan. The *PSMA* and the strengthening of corporate services through the human resources planning process will help ensure that the Department has the human resources it requires to deliver on its mission.

Incorporating Sustainable Development Principles into Practice

Health Canada will continue to work towards fulfilling departmental commitments outlined in its Sustainable Development Strategy 2004-2007, *Becoming the Change We Wish to See*, in which programs and services identify how they will incorporate sustainable development principles into practice.

Further exploration of the social dimension and its impact on health will be undertaken to better integrate this pillar with environmental and economic pillars within the context of the development of the Sustainable Development Strategy 2007-2010.

In the upcoming year, efforts will be made to work across federal departments and create interdepartmental targets, where appropriate, to facilitate better linkages of activities fostering a sustainable development approach in areas of mutual interest. Health Canada will also do its part to contribute towards government-wide initiatives, including integrating green procurement policy into the Department.

Endnotes:

1. For more information on Legislative Acts, please visit the Department of Justice Canada's website at: laws.justice.gc.ca/en/index.html
2. www.phac-aspc.gc.ca/new_e.html
3. www.cihr-irsc.gc.ca/
4. www.hmirc-ccrmd.gc.ca/
5. www.pmprb-cepmb.gc.ca/
6. www.hc-sc.gc.ca/hl-vs/reprod/agenc/index_e.html

Analysis of Program Activities by Strategic Outcome

2

STRATEGIC OUTCOME:

Strengthened Knowledge Base to Address Health and Health Care Priorities

Program Activity: Health Policy, Planning and Information

This program activity contributes to the Government of Canada Strategic Outcome: Healthy Canadians with Access to Quality Health Care.

Planned Spending and Full-Time Equivalents (FTEs)				
(\$ millions)	Forecast Spending 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Net expenditures	375.1	288.4	218.2	215.0
FTEs	717	627	604	588

Notes: The decrease in expenditures from 2005-2006 to 2006-2007 is mainly due to a decrease in the level of funding of the Primary Health Care Transition Fund, the sunset of the Northern Health Supplement to the 2003 Health Accord, and the Expenditure Review Committee (ERC) reduction.

The decrease in expenditures from 2006-2007 to 2007-2008 is mainly due to the sunset of the Primary Health Care Transition Fund. The decrease in expenditures from 2007-2008 to 2008-2009 is mainly due to a decrease in funding for the Implementation of Health Canada's Therapeutic Access Strategy.

Figures include an amount for other departmental and regional infrastructure costs supporting program delivery.

Program Activity Description

The objective of this program activity is to provide policy advice and support to the Minister in making decisions to protect and improve the health of Canadians. Health Canada supports the delivery of programs and services to Canadians by developing policies and building and maintaining linkages with other partners to support health care system reform. We also work with international organizations to advance a global health agenda and contribute Canadian expertise. This helps to ensure the health, safety and security of Canadians in a healthier world. We provide a leadership role in strategic planning for the Department. We administer the *Canada Health Act*, and work with provinces and territories on health care renewal and support. We work with others to provide access to health care services for official language minority communities, and the interface between different sectors of the health care system.

To ensure that all Canadians have access to health services when and where they need them, that the quality of those services is continually improved, and that the system can provide the necessary care today and has the capacity to identify and adapt to the emerging needs and challenges of tomorrow, we are focussing renewal efforts, amongst other things, on the health human resources.

Another type of renewal effort is in the legislative and regulatory arenas. Legislation and Regulatory Renewal is an opportunity to deliver a much anticipated, significant and modernized legislative framework for the Health Portfolio. Much of the health protection legislation that forms Health Canada's regulatory base is out of date and not in line with modern technological advancements or public expectations, leading to gaps in what is covered, inconsistencies in addressing health risks and inadequate enforcement/compliance powers.

We provide policy advice and lead initiatives to advance women's health and to increase understanding of how gender interacts with the other determinants of health to affect health outcomes of women, men, boys and girls over their lifespan.

We undertake research and analysis to improve the availability, quality and use of evidence in health policy decision-making. We reach our goal by identifying future policy research needs, conducting extramural peer-reviewed policy research to meet these needs, communicating the results within Health Canada and externally, and by providing the expertise and tools needed for a sound and rigorous analysis of health policy options.

Our priorities

In addition to tracking emerging issues on an ongoing basis, we continue to actively participate in and collect invaluable information from various scanning activities to help identify future risks to Canadians and challenges to Health Canada. It is important to note that numerous external factors can influence our ability to focus exclusively on our priorities (e.g., the increased attention to global preparedness and response to a possible pandemic influenza outbreak or coordinating relief efforts for natural disasters). We intend to focus on the following priorities in 2006-2007:

Partner in health reform

In the 2004 Health Accord, federal, provincial and territorial governments committed to health system reforms that will improve timely access to quality care. To support the Accord, the federal government is flowing \$41 billion to provinces and territories over ten years, including \$5.5 billion to augment provincial/territorial existing investments and efforts in wait times reduction. In December 2005, provincial and territorial governments announced a first set of ten common evidence-based benchmarks in the areas such as cancer screening and care, cardiac surgery, hip and knee replacements and cataracts. Health Canada will work with the provinces and territories on

the development of a Patient Wait Times Guarantee. Care guarantees have been suggested by many experts as one of the measures to reduce wait times.

We have made progress on all initiatives in the Accord and all governments are moving forward with their health system reforms. Work is also continuing to implement 2004 Health Accord initiatives in the following areas:

- ◆ implementing the Internationally Educated Health Care Professionals (IEHP) Initiative, which will provide additional funds to accelerate and expand the assessment and integration of IEHPs for participating governments;
- ◆ monitoring the commitment to provide first-dollar coverage by 2006 for certain home care services, based on assessed need, including: two week provision of case management and intravenous medications related to discharge diagnosis, nursing and personal care for short-term acute home care; two-week provision of case management and crisis response services for short-term acute community mental health home care; and case management, nursing, palliative-specific pharmaceuticals and personal services for end-of-life care;
- ◆ working to ensure that the populations served by federal departments (specifically First Nations, Inuit and veterans) will have access to the home care services specified in the Accord;
- ◆ continuing to support the Best Practices Network for primary health care, which is facilitating information sharing and addressing common barriers to progress; and
- ◆ working with the Health Council whose mandate is to monitor and make annual public reports on the implementation of the 2003 First Ministers' Accord on Health Care Renewal and to report on progress of the elements set out in the 2004 Health Accord.

In 2006-2007, we will continue to collaborate with our provincial and territorial counterparts as we implement commitments to health care system reform.¹

The Primary Health Care Transition Fund (PHCTF) (\$800 million over six years) is providing funding to the provinces and territories to support their efforts in reforming their primary health care systems. One of the objectives of the primary health care reform is to strengthen health promotion and prevention activities (both primary and secondary) within the sector so it can help Canadians make healthy lifestyles choices and thereby reduce the incidence of conditions such as diabetes and cancer. With PHCTF-funded initiatives concluding in 2006-2007, dissemination activities are planned to promote the uptake of knowledge and results. In turn, these knowledge transfer activities will support ongoing reform activities.

In concert with other departments involved in the *Action Plan on Official Languages*, we will work towards implementing administrative practices and policies to ensure that the enhanced accountability provisions of the *Official Languages Act*, which were introduced in November 2005, will be reflected in the provision of health services to official language minority communities across Canada.

Hepatitis C

The Government of Canada is committed to helping all those infected with hepatitis C. On July 25, 2006, the Prime Minister announced that the government reached an agreement on the elements of a settlement for those Canadians who contracted hepatitis C from the blood system before January 1, 1986 and after July 1, 1990.

Under the terms of the agreement, the Government of Canada will set aside nearly \$1 billion in a special settlement fund. The level of compensation will be based on the principle of parity with compensation already provided by the federal government for those who were infected between 1986 and 1990.

Benefits will be paid on a present-value basis, meaning that class members will receive the entire sum of their compensation up front, based on such factors as current disease level and probability of disease progression. This will also serve to minimize administrative costs.

The Government of Canada will be working as quickly as possible to complete the steps needed before compensation is provided to the class. A final detailed agreement needs to be completed, and must be approved by Courts in four jurisdictions. Furthermore, an administrative structure must be set up to evaluate applications and forward payments. The federal government cannot control the timing of every remaining step, however, all efforts will be made to ensure that this proceeds as quickly and as effectively as possible.

Pandemic Influenza

Health security is a critical component of Canada's objectives for health policy, foreign policy and national security. The most pressing challenge for health security at the current time is the threat of an influenza pandemic. As such, it is critical that the Government of Canada is prepared for an influenza pandemic, and that work is undertaken with partners in the public and private sectors domestically and internationally to strengthen preparedness throughout Canada.

The potential severity and impacts have resulted in unprecedented co-operation and collaboration on a global health issue. We will continue to play an active role in preventing and preparing for avian and human pandemic influenza. This involves close collaboration with the Public Health Agency of Canada, which is the public health lead for pandemic influenza preparedness in the Government of Canada. We will strengthen preparedness in the Department's key areas of responsibility, such as First Nations and Inuit health, the regulation of vaccines, and occupational health services for federal employees. We will also complete a business continuity plan in the event of an influenza pandemic to ensure that support is provided for employees and that critical services can continue to be delivered in the event of large-scale worker absenteeism.

We will also focus on international collaboration for avian and human pandemic influenza preparedness and response, which is a critical element of Canada's domestic preparedness. Governments across the

world have declared avian influenza to be a “global threat”, and have recognized that international collaboration is necessary in order to control the H5N1 avian influenza outbreak, and to prepare for an influenza pandemic. Intensive efforts are underway through multilateral organizations (e.g., World Health Organization, Food and Agricultural Organization, World Organization for Animal Health) and through regional organizations (e.g., Asia Pacific Economic Cooperation, the Security and Prosperity Partnership in North America) and other fora such as G8 to collaborate in preparedness efforts.

Mental Health

Mental health and well-being are fundamental to Canadian's quality of life, as well as our social and economic development. At the same time, mental illnesses such as depression, anxiety disorders, schizophrenia and bi-polar disorders represent a significant public health challenge, impacting as many as 1 in 5 Canadians and resulting in significant costs to the health care system, society and the economy.

In May 2006, the Standing Senate Committee on Social Affairs, Science and Technology released a report on mental health, mental illness and addiction in Canada. Entitled *Out of the Shadows at Last*, the report underscored the breadth of the challenge associated with mental health, mental illness and addiction, as well as the need for governments to work together in addressing this important issue. Canada is currently the only G7 country without a national strategy or action plan on mental health. The federal government will work with its partners to build the foundation for a national approach to mental health and mental illness in Canada.

Health Canada will also continue to support the development of sound mental health policies and programs within the federal government, and among the provinces and territories. This includes ongoing improvements to the mental health programs, services and support to First Nations and Inuit, as well as broader efforts to improve the mental health and well-being of all Canadians, in areas such as research, information and knowledge exchange, and best practices.

Pharmaceuticals Management Strategy

Drug therapy is an increasingly important component of modern health care. Appropriately prescribed and used, pharmaceuticals can improve health outcomes for individuals and reduce costs in other health care sectors, e.g., hospitals. The development of new drugs has the potential for even greater benefits in the future. Despite their benefits, prescription drugs pose a number of challenges related to equitable and affordable drug access, drug safety and effectiveness, optimal drug therapy, and health care system sustainability.²

Health Canada has a number of roles with respect to pharmaceuticals at different points in the drug life cycle, including at the research and development, market approval, prescribing, access, utilization and reimbursement stages. In support of improved health outcomes for Canadians and system sustainability, we will work to optimize these roles using available policy, regulatory and program instruments to better integrate pharmaceuticals into a seamless, robust health care system. We will seek to capitalize on opportunities in areas such as post-market drug safety and effectiveness, appropriate drug prescribing and use, and the drug pricing and research role of the Patented Medicine Prices Review Board.

We will also continue to work with the provinces and territories on pharmaceutical activities initiated as part of the 2004 Health Accord under the National Pharmaceuticals Strategy – an integrated, collaborative, multi-pronged approach to addressing pharmaceutical challenges that builds on governments' shared roles in the pharmaceuticals sector and previous collaborative pharmaceutical initiatives. These activities will be linked, where appropriate, to federal initiatives to modernize the regulatory system for therapeutic products and to integrated pharmaceuticals management among federal jurisdiction drug plans.

Legislative Renewal and Regulatory Reform

Under the Health Protection Legislative Renewal exercise, which responds to shortcomings in Health Canada's legislative basis for health protection,

Health Canada, with the Public Health Agency of Canada, continues to review its health protection legislation. The review is intended to modernize and reinforce key existing legislation, namely the *Food and Drugs Act* (1953), the *Hazardous Products Act* (1969) and the *Radiation Emitting Devices Act* (1969) through the development of enhanced health protection legislation. The resulting legislative framework will serve to modernize and strengthen the existing federal laws dealing with health protection and provide clear policy direction. As part of this exercise, the Department is also engaged in reviewing the proposed legislation to determine whether to proceed with a single piece of legislation or to continue with a phased approach as started by the expediting of the new *Quarantine Act* (2005).

Under the auspices of the Government of Canada's Smart Regulation initiative, Health Canada has been actively contributing to the development of a series of policies, frameworks and tools aimed at modernizing the Canadian regulatory system so that it can better respond to the challenges it currently faces (e.g., rapid scientific developments, globalization, or cross-boundary health risks, etc.) The goal of the initiative is to build a robust and flexible regulatory system that not only maximizes health, safety and environmental protection but also promotes an innovative economy.

This year, we will continue to coordinate the Department's input into a proposed Government Directive on Regulating (GDR), which is intended to build on the existing Federal Regulatory Policy by promoting increased regulatory transparency, the alignment of legislative and regulatory planning, and strategic coordination and collaboration with provincial, territorial and international partners.³

Establishment of the new Assisted Human Reproduction Agency of Canada and new regulations

We will continue to work toward the implementation of the *Assisted Human Reproduction Act*, including support to the Assisted Human Reproduction Agency's

successful establishment in Vancouver, B.C. in 2006–2007. The Agency will license and inspect activities controlled under the Act. The recruitment process leading to Governor in Council appointments to the Agency's new board of directors will be completed.

We are proceeding concurrently with the development of the components of the regulatory framework, which are required before the Agency can implement the licensing and regulatory regime for activities controlled under the Act. The fact that very little currently exists in terms of established guidelines, standards or regulations necessitates careful and comprehensive consultations, to ensure that regulatory objectives are met while at the same time minimizing the regulatory burden on Canadians. Regulations are expected to be promulgated in 2006–2007 to bring the last outstanding prohibition into effect and work will continue to develop the remaining components of the regulatory framework to implement the Act.

Health Human Resources

The health care sector is labour intensive. Between 60 and 80 cents of every health care dollar in Canada is spent on health human resources (HHR), and this does not include the costs of education. Currently, there are reported shortages for physicians, nurses and other health care providers. HHR is one of the four cornerstones to support real health system change. Therefore, building capacity in the system and providing adequate supply, distribution, and appropriate use of HHR is critical to reducing wait times and improving timely access to health care.

Building on health human resource activities that support the 2003 Accord and the 2004 Ten-Year Plan, we will continue with the implementation of the Health Human Resource Strategy through three broad initiatives (Pan-Canadian Health Human Resource Planning; Interprofessional Education for Collaborative Patient-Centred Practice; and Recruitment and Retention) and the Internationally Educated Health Care Professionals (IEHP) Initiative, which will provide

additional funds to increase health care professional supply through the acceleration and expansion of the assessment and integration of IEHPs for participating governments.

Role of science

It is through scientific discoveries and innovations that the greatest potential benefits for the health of Canadians lie. Science also provides a foundation of evidence for policies and programs to improve the health of Canadians. In addition to work in many health sciences policy areas, we will focus on the following areas in 2006-2007:

- ♦ The dramatic increase in the development and use of genetic technologies in the health system has clear implications for the sustainability of Canada's health care system in terms of potential new ways to prevent, diagnose, treat and cure thousands of conditions. The development of new genomic-based drugs (pharmacogenomics) and diagnostics will also affect health care delivery. We will undertake policy research and analysis to support federal discussions and action in both domestic and international fora on issues such as pharmacogenomics, patent pooling in medical genetics, intellectual property issues related to stem cell research, and the development and uptake of OECD guidelines on quality assurance in genetic testing. We will also explore approaches to stimulate innovation and undertake analysis of various incentive mechanisms to spur research and development to address health needs, including vaccine development.

We continue to be committed to working with our partners on early issue identification and the monitoring of emerging technologies that impact the health of individuals, vulnerable populations and the overall health system. We will support the development of evidence-based recommendations and strategies through continued collaborative work to support excellence in the ethical conduct of human research in areas such as: research ethics education, quality improvement, the examination of models

of accreditation and the development of process standards for research ethics boards; policy development on good research practices related to biobanking of human biological material samples; and the identification of potential societal impacts of nanotechnology.⁴

Human resources risks and challenges

The human resources challenges are very similar to those faced in other areas of the Department and even across the federal government including staff turnover, retention and the recruitment of skilled and knowledgeable policy analysts. Given the extent of our involvement in policy work and the importance of a viable policy capacity, these issues must be addressed to ensure we maintain an adequate capacity to address future policy issues. Though we are heavily involved in recruitment programs (e.g., Economist and Sociologist Development Program), we continue to face challenges in recruiting and retaining policy analysts, given the competitive labour market in this area.

Horizontal linkages

We continue to manage and collaborate on horizontal files for the Department and build linkages within and outside of Health Canada. For example, we manage and coordinate the Federal Inter-departmental Task Force on Mental Health. We also work across the Health Portfolio to ensure that public health is integrated within our advice and support to the Minister.

Continuing on the horizontal policy research themes (Health Innovation, Research on Regulation, Healthy Communities and First Nations and Inuit Health Sustainability) that resulted from the policy research priority setting exercise completed in 2004-2005, cross Portfolio steering committees pertaining to each of the four priority themes were established under Memoranda of Understanding (MOUs) among our branches and the Public Health Agency of Canada. These MOUs will guide our research efforts over the next two to four years.

Since February 2004, the federal Interdepartmental Working Group on Trafficking in Persons, including organs and tissues (IWG TIP), with 14 federal departments and co-chaired by the Departments of Foreign Affairs and Justice, was mandated to coordinate federal efforts to address TIP and develop a federal strategy. We are the lead for the Health Portfolio and we continue to coordinate the Portfolio's input while promoting a holistic approach to the inclusion of health, gender and diversity considerations.

Health Canada is an active member of the Ontario Federal Council's Ontario Information Technology Network. The objective of the OFC/OITN is to identify and promote areas for collaboration and the sharing of IT resources and strategic planning information among federal government IT managers in the Region. Two significant areas of collaboration are in remote locations IT support and connectivity and integrated IT infrastructure planning.

Performance Measurement Strategy

We continue to enhance our performance measurement to provide information on our activities. To streamline the numerous reporting mechanisms, we adopted a new strategy, linking our activities directly to outcomes over the immediate (one to three years), intermediate (three to five years) and long term for outcomes five years and beyond. This approach will support all of our public reporting requirements including the Program Activity Architecture and the Departmental Performance Report. During this

reporting cycle, we will work towards collecting performance information to report on the period over the next three years.

The intermediate outcomes planned for the policy planning and research program activity identified below will be addressed in various areas. As a result, a wide spectrum of activities across the Portfolio will be directed towards the same goal.

Expected Results	Performance Indicators
Goals and objectives identified for specific strategies and initiatives	<ul style="list-style-type: none">♦ Reflection of goals and objectives identified in workplans and priorities
Knowledge development and transfer of specific health policy issues	<ul style="list-style-type: none">♦ Dissemination of research (e.g, number and type of studies completed, number of requests for input, number of links added to websites)♦ Assessment of knowledge development and transfer among governments and stakeholders

Key Programs and Services

Health Care System Policy

In September 2000, First Ministers agreed to continue to make primary health care reform a priority and indicated that improvements to primary health care are crucial to the renewal of health services. In response to this commitment, the Government of Canada announced the Primary Health Care Transition Fund (PHCTF), an \$800 million investment from 2000-2001 to 2006-2007. The Fund is supporting provinces, territories and various health care system stakeholders, via contribution agreements, in their efforts to reform the primary health care system. More specifically, it will support the transitional costs of implementing sustainable, large-scale primary health care renewal initiatives which will improve access, quality of care, accountability, and integration of services. Although the PHCTF itself is time-limited, the main goal of the Fund is to bring about permanent and sustainable changes to the organization, funding and delivery of primary health care services. The fund is supported by a federal, provincial and territorial advisory group and Health Canada plays an active facilitation role to foster dialogue and knowledge sharing between and among recipients (government and non-government). With PHCTF-funded initiatives concluding in 2006-2007, all recipients will be submitting final reports including their evaluation reports, and dissemination activities are planned to promote the uptake of knowledge and results. In 2004-2005 a mid-term evaluation of the PHCTF was conducted to assess program structure and effectiveness. The final, or summative evaluation, will be conducted in 2006-2007 and will focus on the results and impact of the PHCTF; it will be available in early 2007-2008.

Health Canada is also supporting knowledge transfer and the uptake of successful strategies the Best Practices Network (FMM 2004). The Primary Health Care Transition Fund will ensure the results and lessons learned of the program are shared for continued progress in primary health care renewal. Planned activities include:

- ◆ a series of synthesis papers highlighting the evidence in areas such as chronic disease management, information management, collaborative care (i.e. teams) and evaluation methodology;
- ◆ a series of fact sheets on the results and evidence of each initiative;
- ◆ a national conference in February 2007; and
- ◆ a database, accessible via Health Canada website, to be an ongoing resource for provinces/territories, stakeholders and the public.

Several provincial and territorial governments have publicly committed to continuing the primary health care reforms begun under the PHCTF.

Recognizing the evidence gap for quantitative data on primary health care in Canada, the PHCTF funded the Canadian Institute of Health Information to develop a set of consensus-based national indicators. A legacy of the PHCTF will be the improved capacity for evaluating primary health care. As well, the Health Council of Canada's monitors and reports publicly on primary health care progress.

Note: With the exception of Quebec, all provinces and territories (and in fact all recipients) are required to submit regular reports to Health Canada including narrative progress reports, financial reports, final reports on results and final evaluation reports. These requirements are consistent with the Treasury Board Transfer Payment Policy and related accountability requirements associated with contribution agreements.

Expected Results		Performance Indicators			
Knowledge development and transfer of specific health policy issues		◆ Dissemination of research (e.g, number/type of studies completed, number of requests for input, number of links added to websites)			
		◆ Assessment of knowledge development and transfer among governments and stakeholders			
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
66.1	20	0.1	0	0.1	0

*All financial figures in millions of dollars

Intergovernmental

Health Canada is responsible for the administration of the *Canada Health Act (CHA)*, which involves monitoring a broad range of sources to assess provincial and territorial compliance with the criteria and conditions of the *Act*, working in partnership with provinces and territories to investigate and resolve *CHA* compliance issues, pursuing activities to encourage provincial and territorial compliance with the *CHA*, providing policy advice and informing the Minister of possible non-compliance with the *Act*, and recommending appropriate action.

The Department also provides strategic advice and coordination on a full range of Health Portfolio policy issues involving collaboration with provincial and territorial partners, while ensuring that federal priorities are advanced.

Under the *Official Languages Act* and the Action Plan for Official Languages, we manage health contribution programs to support the vitality of official language minority communities across Canada and ensure ongoing consultations with these communities.

Expected Results		Performance Indicators			
Knowledge development and transfer of specific health policy issues		<ul style="list-style-type: none"> ◆ Dissemination of research (e.g, number and type of studies complete, number of requests for input, number of links added to websites) ◆ Assessment of knowledge development and transfer among governments and stakeholders 			
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
44.0	64	29.8	64	29.8	64

*All financial figures in millions of dollars

International

Public health risks and threats originating beyond Canada's borders increasingly influence the health of Canadians. International collaboration on global health policies and developments is of growing importance to the sustainability and responsiveness of Canada's health system. Health Canada positions itself internationally to: anticipate and respond to international health developments and their impact on Canadians and the health system; influence international health events and fora to improve health globally; provide leadership on selected health issues such as pandemic preparedness, HIV/AIDS and tobacco; and work with the multiplicity of players on the global health scene to advance health and health security.

In order to shape and strengthen the international agenda on health and health care issues, consistent with Canada's priorities and values, we will continue to work in close cooperation with multilateral agencies such as the World Health Organization (WHO) and the Pan American Health Organization (PAHO).

Expected Results			Performance Indicators		
Knowledge development and transfer of specific health policy issues			◆ Dissemination of research (e.g, number and type of studies complete, number of requests for input, number of links added to websites)		
			◆ Assessment of knowledge development and transfer among governments and stakeholders		
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
21.8	26	21.6	26	22.0	26

*All financial figures in millions of dollars

Assisted Human Reproduction Implementation Office

Description: Set-up of Assisted Human Reproduction Agency of Canada

Expected Results		Performance Indicators			
The Assisted Human Reproduction (AHR) Agency begins operations in 2006-2007.		◆ Governor-in-Council appointments of candidates to board of directors completed.			
Regulatory development – Consultations to continue on all remaining sections of the AHR Act in 2006-2007 to be followed by drafting of regulations in preparation for prepublication in Canada Gazette Part I.		◆ Timely policy development papers and reports.			
Progress towards the development of the Personal Health Information Registry.		◆ Consultations in support of regulatory development.			
		◆ Draft regulations in preparation to be prepublished in Canada Gazette Part I.			
		◆ Performance will be measured by state of approval of plans and assessments, and the stage of a test version of the Registry.			
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
4.9	29.8	3.3	22	1.6	8

*All financial figures in millions of dollars

Legislation Renewal

Health Canada will continue the development of a proposal to replace the *Food and Drugs Act* (1953), parts of the *Hazardous Products Act* (1969/safety of consumer and industrial products) and the *Radiation Emitting Devices Act* (1970), with a new Health Protection Legislative framework. The objective of the new framework is to update, strengthen, and integrate federal health protection legislation to be more responsive to present and future social and technological realities and provide the tools needed to better protect the health and safety of Canadians.

Expected Results			Performance Indicators		
Goals and objectives identified for specific strategies and initiatives			♦ Reflection of goals and objectives identified in work plans and priorities		
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
1.3	0	1.3	0	1.3	0

*All financial figures in millions of dollars

Women's Health and Gender Analysis

Health Canada works horizontally to promote equitable health outcomes across the lifespan for women, men, boys and girls. It provides leadership and oversight to: women's health; women's health research and information; gender based analysis; and, with a diversity overlay, in policy development within the Health Portfolio. It funds the Centres of Excellence for Women's Health, Canadian Women's Health Network as well as Research Working Groups, and collaborates with an expansive network of women's health organizations and other stakeholders at the international, provincial and regional levels to engage the public in the policy development process.

Expected Results			Performance Indicators		
Knowledge development and transfer for specific health policy issues			♦ Dissemination of research (e.g., number and type of studies completed, number of requests for input, number of links added to websites)		
Enhanced health policy research capacity (ongoing)			♦ Assessment of knowledge development and transfer among governments and stakeholders		
			♦ Number of hits to website		
			♦ Assessment of health policy research capacity among governments and key stakeholders		
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
4.9	19	4.9	19	4.9	19

*All financial figures in millions of dollars

Applied Research, Dissemination and Accountability

In the area of applied research and analysis, we support policy decision-making by developing and implementing a strategic policy research agenda for medium and long-term issues, helping co-ordinate internal and external policy research activities, and funding extramural research under the Health Policy Research Program. This fosters a performance-based and outcome-oriented culture by developing the tools and information base for better accountability. It plays a key role in knowledge management by managing a policy research dissemination program, including publication of the Health Policy Research Bulletin, and by making core data sets and the informatics tools to access them available.

Expected Results

Target audiences accessing data, analysis and information that is useful for evidence-based policy and program development

Performance Indicators

- ◆ Demonstrated impact of analytical and performance information and tools on policy and program development
- ◆ Percentage of target population rating analytical and performance information and tools as useful
- ◆ Percentage of new Statistics Canada and the Canadian Institute for Health Information (CIHI) releases made available on time within Health Canada
- ◆ Number of data files and publication made available on the Department's electronic data and information system

2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
4.9	60	36.6	60	36.6	60

*All financial figures in millions of dollars

Endnotes

1. www.hc-sc.gc.ca/hcs-sss/delivery-prestation/fptcollab/2004-fmm-rpm/index_e.html
2. For more information on these challenges, see the *National Pharmaceuticals Strategy Progress Report*, summer 2006.
3. www.regulation.gc.ca/default.asp?Language=E&Page=thegouvernementdirectiveon

4. Nanotechnology is defined as the application of science to develop new materials and products, where at least one dimension is smaller than 100 nm, and involves the manipulation of matter at the nanometre scale – a nanometre (nm) is a billionth of a metre (10⁻⁹m), or a hundred times smaller than a virus.

Other programs and services that contribute to this program activity total \$140.5 million for 2006-2007.

STRATEGIC OUTCOME:

Access to Safe and Effective Health Products and Food and Information for Healthy Choices

Program Activity – Health Products and Food

This program activity contributes to the Government of Canada Strategic Outcome: Healthy Canadians with Access to Quality Health Care.

PLANNED SPENDING AND FULL-TIME EQUIVALENTS (FTEs)				
(\$ millions)	Forecast Spending 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Gross expenditures	294.6	303.3	300.4	289.3
Less: Expected responsible revenues	37.7	41.2	41.2	41.2
Net expenditures	256.9	262.1	259.2	248.1
FTEs	2,503	2,592	2,667	2,656

Notes: The increase in expenditures from 2005-2006 to 2006-2007 is mainly due to an increase in the level of funding for Strengthening the Safety of Drugs, and is partially offset by a decrease in funding for the Implementation of Health Canada's Therapeutic Access Strategy and the Expenditure Review Committee (ERC) reduction.

The decrease in expenditures from 2006-2007 to 2007-2008 is mainly due to the sunset of funding for Health Canada's Response to Bovine Spongiform Encephalopathy in Areas of Risk Management and Targeted Research. The decrease in expenditures from 2007-2008 to 2008-2009 is mainly due to decrease in funding for the Implementation of Health Canada's Therapeutic Access Strategy, and the sunset of a transfer from Agri-Food and Agriculture Canada for the Agriculture Policy Framework.

The change in the FTEs is due to the increase of the salary component of the operating budget.

Figures include an amount for other departmental and regional infrastructure costs supporting program delivery.

Program Activity Description

As Canada's federal authority responsible for the regulation of health products and food, Health Canada evaluates and monitors the safety, quality and effectiveness of the thousands of drugs, vaccines, medical devices, natural health products and other therapeutic products available to Canadians, as well as the safety and nutritional quality of their food. Under this program activity we also review veterinary drugs sold in Canada for safety and effectiveness for animals, and for the safety of foods derived from animals treated with these drugs. Finally, we promote the health and well being of Canadians through a broad range of activities related to health products and food, including developing nutrition policies and standards such as Canada's Food Guide to Healthy Eating.

A core federal health protection responsibility is the regulation of therapeutic products under the legislative framework of the *Food and Drugs Act*. The federal government's role in protecting health and safety is well recognized and supported by Canadians. However, the regulatory system for drugs and other therapeutic products is facing a number of challenges, including: rapidly advancing science and technology; public expectations for access, safety and transparency; improving linkages to health system decision-making regarding coverage for, and cost of, pharmaceuticals and related products in current systems; and meeting industry demands for faster approvals and increased intellectual property protection.

There is strong evidence of rising rates of acute and chronic disease directly associated with diet (e.g., diabetes among Canadians). While Canadians are increasingly aware of the threats to their health from factors like poor diet, physical inactivity and excessive weights, work and leisure patterns in our society have changed, making us less active and more reliant on foods high in energy which is contributing to increasing rates of chronic disease. With respect to food safety, emergence of new foodborne pathogens and emerging infectious diseases (e.g., avian influenza), and the threat of bioterrorism (e.g., linked to botulism), have increased consumer expectations in Canada and abroad for the role of governments in ensuring the quality and safety of Canada's food supply.

In moving forward, there is a need to continue to modernize legislative and regulatory frameworks to keep pace with changing science, consumer expectations, international developments and other pressures for change. To ensure an integrated approach, it is suggested that a long-term plan to modernize the regulatory system for therapeutic products be developed, based on a vision to improve access to safe, effective and affordable drugs and other therapeutic products. To strengthen collaboration with provincial and territorial governments in their health system and drug plan management roles, this plan needs to be strongly linked to the National Pharmaceuticals Strategy. From the perspective of food and nutrition, Health Canada will continue to work with Health Portfolio partners, the Canadian Food Inspection Agency and other partners to provide leadership on food policy issues in order to improve health outcomes for Canadians and reduce the burden on the health care system.

Health Canada relies heavily on science and risk management in making our regulatory and policy decisions. As scientific knowledge and technical expertise are critical inputs into the development of our regulations, policies and advice, we will continue to conduct laboratory-based research. We will focus on the human health implications of potentially hazardous chemicals in the food supply, including effects on behaviour and the immune system; conditions leading to the survival, growth and toxin production of infectious and toxigenic bacteria; awareness of hazard-prone foods; establishment of safe levels to prevent human injury; and risks and benefits associated with nutrients in the diet. We will also continue to conduct research in areas related to the safety and effectiveness of biotherapeutics, blood and blood products, and vaccines.

Health Canada faces a pressing challenge in sustaining our human resources. It is estimated that within the next five years a significant number of our employees in the specialized and technical fields, which includes biologists, chemists and medical officers, will be eligible for retirement. We will continue to address this through our human resources planning.

We are working with federal science and technology partners to promote and protect the health and safety of Canadians. Some of our work includes collaborating directly with Agriculture and Agri-Food Canada, Environment Canada, the Canadian Food Inspection Agency (CFIA) and the Public Health Agency of Canada (PHAC) to develop responsive food policies and regulations, such as Canada's Strategy for Safe Food. We are also working with CFIA to promote food safety as a science priority for Canada. Our ongoing work with Statistics Canada and PHAC is enabling us to collaborate on public health data surveys as well as to share information that is important in our ongoing analysis of and preparation for potential health risks associated with emerging diseases.

Internationally, Health Canada is working with the World Health Organization (WHO) and other multilateral organizations on health product and food safety issues. We are also working with other governments to strengthen and promote broader regulatory cooperation and encourage technical information exchange. We will continue to implement the commitments in the Security and Prosperity Partnership of North America, including hosting discussions on pharmaceutical review processes, food safety regulatory coordination, assessment and enhanced surveillance research with related agencies in Canada, the U.S. and Mexico. Bilaterally, we will work with the U.S. Food and Drug Administration through our memorandum of understanding, and on initiatives such as the development of a single set of reference values for nutrition labelling and improving the compatibility between our approaches to food fortification.

Health Canada’s regional offices contribute to the delivery of our mandate by developing and delivering key programs and services, including monitoring risks, and the investigation and inspection associated with

the importation, sale and manufacture of health products. Working directly with regional stakeholders and provincial and municipal governments, regional offices promote and facilitate consultation and collaboration.¹ These partnerships are allowing our regional offices to participate in the monitoring of adverse reactions and assist in developing policy responses on food safety, nutrition, natural health products, antimicrobial resistance, and the efficacy of health products. Further, regional laboratories are increasing our science capacity to develop and manage food safety research and surveillance projects on natural toxins, genetically modified food, food allergen detection, method development and nutrition as part of the national laboratory network. Two of these laboratories are also supporting our responsibilities to ensure manufacturer compliance with regulatory requirements for health products.

Performance Measurement Strategy

The Performance Measurement Strategy for this strategic outcome will help us measure our expected results over time, and determine if our current program activity is appropriate to ensure Canadians

have access to safe and effective health products and food, as well as to provide useful information for healthy choices.

Expected Results	Performance Indicators
Access to Safe and Effective Health Products and Food and Information for Healthy Choices	<ul style="list-style-type: none">◆ Level of satisfaction of Canadians and health professionals with the information disseminated for healthy choices and informed decision-making◆ Incidence of foodborne illnesses (where food is the causative agent)

Key Programs and Services

Pre-market evaluation and regulatory process improvement

Description: Making regulatory functions more efficient, effective, and responsive to Canadians by streamlining processes and collaborating more closely with other organizations to ensure Canada continues to have a world class regulatory environment.

Expected Results		Performance Indicators			
Improved timeliness, transparency and predictability of the regulatory process		<ul style="list-style-type: none">◆ Percentage of overall workload in backlog and percentage of decisions issued within target for submission reviews of:<ul style="list-style-type: none">- pharmaceuticals- biologics- food additives, packaging, chemical contaminants, novel foods and nutritional submission processing*			
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
125.8	1,164.3	124.4	1,198.0	119.1	1,193.1

* Data is collected and reported quarterly. Our commitment is to meet 90% of performance targets for new pharmaceutical drug submission reviews by March 2006, and for new biologic drug submissions by March 2007. Baseline data for expected performance results is available within current tracking systems and internal records.

** All financial figures in millions of dollars

Health Canada will contribute to regulatory renewal through improving regulatory performance and modernizing the regulatory system.² For example, given the increasing number and complexity of drug submissions, the initiatives under the Therapeutics Access Strategy will continue to reduce and eliminate submission backlogs, enabling us to meet our performance targets for pharmaceuticals in March 2006 and biologics and genetic therapies by March 2007.³ In addition, we are reducing submission times for veterinary drugs and have set service standards dependent on submission type. These milestones will be met by enhancing human resources capacity and increasing international collaboration and cooperation as well as adopting and applying project management techniques. The Community of Federal Regulators, a partnership of all federal departments and agencies that have a regulatory role, is working to meet the requirements of the proposed new Government Directive on Regulating and Smart Regulations.⁴

We will continue to develop and apply innovative approaches to the regulation of health products and food to improve and sustain the timeliness and efficiency of the regulatory process to address the concerns of Canadians regarding safety, effectiveness and access. We will develop new regulatory approaches for radio-pharmaceuticals used for diagnosis and radiation therapy; for product-specific health claims for foods; for drug product licensing to support early access to promising drug therapies; and for a national approach to clinical trials. As well, a new external charging regime will be developed as part of a long term funding strategy to ensure adequate resources to sustain regulatory performance for human and veterinary drugs and other therapeutic products. We will begin to review regulations that require the pre-market safety assessment and authorization of foods and food products before they can be offered for sale.

As part of Health Canada's initiative to strengthen the safety system for therapeutic products, we will strengthen the oversight of clinical trials and investigational testing of medical devices conducted in Canada, access points for patients to new and innovative therapies. The trials and investigational testing provide the evidence of safety and efficacy required by the Regulations before a product may receive a general market authorization from Health Canada. The Department will increase capacity in 2006-2007 to allow the continued assessment of an increased number of applications within targeted time-frames; strengthen capacity to assess clinical trial and investigational testing of adverse reaction reports in order to detect, communicate and act on safety signals; and engage sponsors earlier in the clinical trials process. Moreover, through the safety initiative, Health Canada will update the national standards for blood and for cells, tissues and organs, while continuing to develop and implement

an appropriate regulatory framework for these components. A program for compliance inspections of establishments will also be implemented.

Health Canada will work with the federal, provincial and territorial health and agriculture agencies involved in administering the national food safety system to better respond to current and emerging food safety issues. A major initiative will be Canada's Strategy for Safe Food. It engages federal, provincial and territorial governments, industry, academia and consumer groups to improve the overall management of the food safety system in Canada by developing a common vision and national priorities, and national public health outcomes, targets and indicators.

We will continue to lead development of a federal Biotechnology Stewardship Framework to encourage an integrated approach to managing the risks and benefits of biotechnology products and services in the public interest.

Information, education and outreach on health products, food and nutrition					
Description: Responding to the growth of Canadian public interest in health issues by disseminating more information, written in language that is easy to understand, on how Canadians can maintain and improve their health.					
Expected Results			Performance Indicators		
Improved adoption in making safe and healthy choices for health products, food and nutrition			◆ Percentage of target populations using information in their decision-making*		
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
13.1	93.6	13.0	96.3	12.4	95.9
* Data is analysed and reported every two years. Health Canada will conduct a survey to assess the rate at which people use information to make health related choices. The target and actual rate will be determined in 2006-2007. The date to achieve the target is April 2008.					
*All financial figures in millions of dollars					

Health Canada will continue to provide useful information about the risks and benefits related to health products and food in order to help Canadians make informed decisions about their health. For example, we will develop food labelling policies as part of an integrated health and food safety policy tool kit that will be capable of responding more quickly and effectively to current and emerging health

and food safety challenges. MedEffect, part of the initiative to strengthen the therapeutic products safety system, will enable us to maintain a website for posting safety alerts, public health advisories, press releases and notices for health professionals, consumers and other interested parties.⁵ A similar website has been developed for veterinary drugs.⁶ Also, as part of the overall effort to better inform

Canadians, Health Canada will continue to provide balanced information on newer technologies and their applications, including biotechnology and nano-technology.

Promoting and supporting healthy eating and informing Canadians about risks related to the food supply are key in helping them to maintain and improve their health. For instance, Canada's Food Guide to Healthy Eating plays an important role in communicating healthy eating to Canadians. In 2006, a revised Food Guide will be completed and disseminated along with supporting materials, including a resource for intermediaries and a web-based interactive component. The Food Guide is being revised to ensure the guidance it offers continues to promote a pattern of eating that meets nutrient needs, promotes health, and minimizes the risk of nutrition-related chronic diseases. At the same time, the revision will strive to improve Canadians' understanding and application of the Food Guide.

Health Canada is working with the Public Health Agency of Canada to advance the healthy eating component of the Integrated Strategy on Healthy Living and Chronic Disease with a focus on multi-sectoral leadership and collaboration nationally and internationally. In addition, through this initiative Health Canada will develop nationally agreed upon nutrition indicators and targets, enhance efforts in knowledge development, synthesis and exchange, as well as develop and enhance nutrition surveillance capacity.

In 2006, an interactive Nutrition Label tool on the Health Canada website will be launched to help Canadians make informed choices about the foods they eat.⁷ The tool will explain how the information on the new food label, which became mandatory on most prepackaged foods in December 2005, can be used to make healthy food choices. Enhancing awareness of nutrition labelling will also be accomplished through related initiatives such as the launch of the revised Canada's Food Guide.

Monitoring safety and therapeutic effectiveness and risk management

Description: Increasing the responsiveness to specific public health issues through the development of monitoring and surveillance systems and stronger compliance and enforcement activities.

Expected Results		Performance Indicators			
Strengthened vigilance over safety and therapeutic effectiveness for health products and food on the market		◆ Overall rating of Health Canada's post-market safety and therapeutic effectiveness activities*			
2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
104.8	1,171.3	103.7	1,205	99.2	1,200.3

* Health Canada's performance will be assessed through surveys, compliance rates and statistical analysis of adverse reaction data. Results from surveys such as those conducted by the Canadian Hemophilia Society will be reviewed as they are available.⁸ Target of 95% compliance from inspections based on internal records has been set for health products. Implementation of new technologies will be used to meet internally harmonized standards for adverse reaction reports by 2007.

*All financial figures in millions of dollars

Recognizing the cross cutting nature of nutrition-related surveillance activities, we will continue to transfer knowledge and build capacity needed for creating and improving evidence-based policies, programs and community interventions in collaboration with the following partners: Statistics Canada, the

Public Health Agency of Canada, the Canadian Institutes of Health Research, and stakeholder organizations such as the Federal/Provincial/Territorial Group on Nutrition, the Network on Healthy Eating and the Canadian Community Health Survey (CCHS) User's Group. Specific activities in 2006-2007 will include

the approval of national nutrition indicators, the dissemination of a user's guide to assist nutrition stakeholders with the interpretation of the CCHS nutrition data, and the dissemination of a themed report on Food Security using CCHS data.⁹

The 2006-2007 Canadian Health Measures Survey conducted by Statistics Canada will help increase Health Canada's capacity to monitor determinants of healthy eating. For example, the results of the survey will help decision-making related to the fortification of foods and the assessment of the prevalence of nutrition-related risk factors for cardiovascular disease and diabetes.

Health Canada will implement new safety measures to strengthen post-market surveillance activities designed to improve real world safety and effectiveness that are linked to the National Pharmaceutical Strategy. We have developed and used the Canadian Adverse Drug Reaction Information System to monitor suspected adverse reactions to health products. With significant advancements in technology and the establishment of international standards for data transmission, we will obtain and begin the implementation of a new and advanced adverse reaction monitoring system. The system will enable the collection and assessment of adverse reaction reports which span the entire life-cycle of health products, from pre-market testing to post-market use, and will improve the overall efficiency of processing, managing and assessing adverse reaction reports. The system will comply with international standards recommended by the International Conference on Harmonization. For veterinary drugs, we have developed an adverse drug reaction reporting system and plan to develop a closer link between pre-market and post-market activities. In addition, Health Canada will consult with stakeholders and Environment Canada to develop environmental assessment regulations to help minimize the effects of therapeutic products on the environment.

Clinical trials require compliance inspections to protect people enrolled in them as well as the integrity and accuracy of the data that supports the application for

Health Canada's Inspectorate Information Quality Management team is managed nationally from within the Quebec Region. One of its responsibilities are the international mutual recognition agreements covering drug/medicinal products good manufacturing practices. Through this program, four evaluations of such mutual recognition agreements were conducted with the Czech Republic and Hungary.

new drugs bound for market. Through the initiative to strengthen the safety system, the number of clinical trial inspections in 2006-2007 will be increased to 60, equivalent to 1.5% of all clinical trials, with a view to achieving the international level of 2% in future years. This objective was recommended by the Standing Committee on Health in 2004.¹⁰

The 2004 Office of the Auditor General's Report noted the need to take action concerning unapproved medical devices on the Canadian market.¹¹ Health Canada had already implemented an inspection program for medical devices establishments in 2004 with limited funds. For 2006-2007, the Therapeutic Product Safety Initiative is increasing the program's funding to \$1.8 million to conduct an estimated 170 inspections and associated follow up activities on medical devices establishments. This will increase our presence in the field and will encourage greater compliance with the Medical Devices Regulations.¹²

Health Canada will continue to work with PHAC to implement the Canadian Pandemic Influenza Plan and to support the WHO's Global Agenda for Influenza Surveillance and Control. The Department will spend \$6.2 million over 5 years, as well as \$1.2 million ongoing, for planning and preparedness activities, providing regulatory guidance during the development of a prototype vaccine, developing a regulator's emergency implementation plan and designing an accelerated approval process.

Transparency, public accountability and stakeholder relationships

Description: Bringing more transparency to our decision-making processes by providing more accessible information about the science underpinning our decisions. Health Canada is also strengthening its capacity to involve the public in decision-making that in the past have been limited to scientific experts.

Expected Results	Performance Indicators
Improved public confidence and trust in the safety of health products, food and the regulatory system	<ul style="list-style-type: none"> ◆ Level of public confidence of safety of health products, food, and nutrition ◆ Percentage of stakeholders who hold a positive view on HPFB's transparency and openness regarding regulation of health products and food
Level of public confidence of safety of health products, food, and nutrition	

2006-2007		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
18.3	163.0	18.1	167.7	17.4	167.0

The progress of public confidence will be monitored with the aim of maintaining or increasing this level. The goal is to attain 85% of stakeholders holding a positive view on transparency and openness initiatives related to health products and food. Feedback from stakeholders will be sought as part of consultation activities to learn and improve over time.

*All financial figures in millions of dollars

Incorporating the views of citizens and stakeholders is critical for effective regulation in the public interest. Maintaining and strengthening public confidence is especially important in a world where the accelerating rate of scientific and technological advances carries both benefits and risks. Public confidence in the regulatory system, particularly as it applies to health-related products and services, is a prerequisite for ensuring that new and sustainable health innovations are available to and used by Canadians. As such, Health Canada is developing new tools to improve the transparency and openness of our regulatory system including convening national consultations and public forums on therapeutic health product and food safety issues important to Canadians, as well as developing and updating food safety guidelines, and assuring that new substances used in health products meet Canada's environmental assessment requirements.

Health Canada's Office of Paediatric Initiatives will serve as a focal point for an integrated approach to child health and safety issues across a number of regulatory areas, including food and nutrition and the safety and effectiveness of health products. The Office will bring together internal and external stakeholders

to focus on these issues. The intended result for Canadians is improved, accessible information on the safety and effectiveness of health products used in children and on safe and nutritious food for them to consume.

In its April 2004 report, the Standing Committee on Health recommended that Canada introduce measures to ensure public confidence in the clinical trial process, starting with the disclosure of information about clinical trials through a public database. An External Working Group was formed to develop options for the registration and disclosure of clinical trial information. Further consultations will be held over the next year and will be informed by international efforts to create a harmonized approach to clinical trial registration and disclosure.¹³ This process will allow for improved public access to meaningful clinical trial information while respecting the need for patient privacy and commercial confidentiality.

Endnotes

- 1. The Ayurvedic Medicine Information Session, Dietary Guidance Regional Consultations, MedEffect Information Session, and Regional Stakeholder Food Forum.
- 2. www.pco-bcp.gc.ca/smartreg-regint/en/08/rpt_fnl.pdf
- 3. Numbers of Health Canada clinical trial applications and medical device investigational testing applications

	2001	2002	2003	2004	2005(Q1-2)
Clinical Trial Applications (30-day)	642	614	691	707	628
Clinical Trial Applications (7-day)	129	677	796	1,026	1,066
Clinical Trial Application – Total	771	1,291	1,487	1,733	1,694
Investigational Testing	89	94	100	123	131

- 4. www.cfr-crf.gc.ca
- 5. www.hc-sc.gc.ca/dhp-mps/medeff/index_e.html;
www.hc-sc.gc.ca/ahc-asc/branch-dirgen/hpfb-dgpsa/mhpd-dpsc/pediat_e.html
- 6. www.hc-sc.gc.ca/dhp-mps/vet/index_e.html
- 7. www.hc-sc.gc.ca/fn-an/surveill/index_e.html
www.hc-sc.gc.ca/fn-an/label-etiquet/nutrition/index_e.html
- 8. www.hemophilia.ca/en/10.1.4.php
- 9. www.hc-sc.gc.ca/fn-an/surveill/index_e.html
www.hc-sc.gc.ca/fn-an/surveill/nutrition/commun/index_e.html
- 10. www.hc-sc.gc.ca/dhp-mps/compli-conform/clini-pract-prat/report-rapport/2003-2004_tc-tm_e.html
- 11. www.oag-bvg.gc.ca/domino/reports.nsf/html/20040302ce.html
- 12. www.hc-sc.gc.ca/dhp-mps/compli-conform/info-prod/md-im/insp_strat_md-strat_insp_im_tc-tm_e.html
- 13. www.hc-sc.gc.ca/dhp-mps/prodpharma/activit/proj/enreg-clini-info/index_e.html

STRATEGIC OUTCOME:

Reduced Health and Environmental Risks from Products and Substances, and Safer Living and Working Environments

Program Activity – Healthy Environments & Consumer Safety

This program activity contributes to the Government of Canada Strategic Outcome: Healthy Canadians with Access to Quality Health Care.

PLANNED SPENDING AND FULL-TIME EQUIVALENTS (FTEs)				
(\$ millions)	Forecast Spending 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Gross expenditures	289.9	305.4	301.9	302.3
Less: Expected spendable revenues	12.0	15.4	15.7	16.0
Net expenditures	277.9	289.9	286.2	286.3
FTEs	1,927	1,956	1,963	1,966

Notes: The increase in expenditures from 2005-2006 to 2006-2007 is mainly due to an increase in the level of funding for the Canadian Environmental Protection Act, which is partially offset by the Expenditure Review Committee (ERC) reduction.

The decrease in expenditures from 2006-2007 to 2007-2008 is mainly due to a sunset of funding for Implementing the Border Air Quality Strategy and Related Air Quality Measures initiative. This decrease is partially offset by an increase in the level of funding for the Canadian Environmental Protection Act.

Figures include an amount for other departmental and regional infrastructure costs supporting program delivery.

Program Activity Description

This program activity touches many elements of day-to-day living that have an impact on the health of Canadians. These include drinking water safety, air quality, radiation exposure, substance use and abuse (including alcohol), consumer product safety, tobacco and secondhand smoke, workplace health, and chemicals in the workplace and in the environment. We are also engaged in other health and safety related activities including the Government's public safety and anti-terrorism initiatives; chemical and nuclear emergency preparedness; inspection of food and potable water for the travelling public; and health contingency planning for visiting dignitaries. Much of this work is governed through legislation including the *Food and Drugs Act*, the *Controlled Drugs and Substances Act*, the *Hazardous Products Act*, the

Radiation Emitting Devices Act, the *Canadian Environmental Protection Act*, the *Tobacco Act*, the *Quarantine Act* and others.

The Canadian public and governments are increasingly recognizing the critical link between human health, the physical environment and the economy. There is growing evidence that environmental factors, hazardous products, tobacco, alcohol and controlled substances contribute to a number of health problems including cancer, asthma and other illnesses and injuries which ultimately will have an impact on our health care system and society as a whole.

Building on our work to help protect the health of Canadians and in accordance with the principles of sustainable development, we will generate new research, partnerships and increased federal

leadership to improve health outcomes, particularly for vulnerable populations such as children and young adults by:

- ♦ Reducing health and safety risks associated with tobacco consumption and the abuse of drugs, alcohol and other controlled substances; and
- ♦ Reducing risks to health and safety, and improving protection against harm associated with workplace and environmental hazards, consumer products (including cosmetics), radiation-emitting devices, new chemical substances and products of biotechnology.

From a health protection perspective, the Department will continue to focus on regulatory priorities such as Legislation Renewal and its impacts on the *Hazardous Products Act*, and we will also address regulations in the area of tobacco and other controlled substances. We will continue to improve national compliance and enforcement programs so they are effective, risk-based, and harmonized with provincial, territorial and international partners and stakeholders.

To protect the health of Canadians, we will continue to advance science and use evidence-based research to formulate our health promotion and harm prevention programs and policies. Health Canada will conduct research and use the science conducted by a network of external science organizations to respond to emerging health and safety challenges to Canadians. We will create a science plan which will outline the strategic scientific directions for our five key program areas for the coming years and we will continue to work closely with a number of other federal departments and agencies on common science-based issues, such as water.

We rely on professionals with expertise in applied sciences (e.g., toxicology, epidemiology, biology) and in both occupational and public health (e.g., nurses, medicine, psychologists, industrial hygienists) to achieve our key results for Canadians. The Healthy

Environments and Consumer Safety Branch must compete with other organizations to attract highly qualified scientists and health professionals.

To address this risk, we will develop and implement a Human Resources Strategy focussed on succession planning, learning, recruitment and retention in order to ensure we have the human resources to support our activities under this strategic outcome.

The broad mandate under this strategic outcome requires sustained partnerships that have a significant impact on the health of Canadians. For example, Health Canada is the lead on horizontal files that require significant interdepartmental collaboration, such as Canada's Drug Strategy. We contribute significantly to the Government of Canada's efforts on health and environment issues. For example, we share responsibility for the *Canadian Environmental Protection Act* with Environment Canada. We also work closely with Environment Canada on files such as climate change.

Internationally, we will continue to advance some of our key work with the U.S. on a range of issues such as children's health and the environment, sound risk-management of chemicals and the Canada-U.S. Memorandum of Understanding on Consumer Product Safety.

Within the Health Portfolio, the Healthy Environments and Consumer Safety Branch works in partnership with the Public Health Agency of Canada, First Nations and Inuit Health Branch, and Health Products and Food Branch to achieve integrated approaches to health. We also collaborate with the provinces and territories through various committees to develop guidelines on issues such as safe drinking water and to coordinate nuclear emergency preparedness activities.

Performance Measurement Strategy

Expected Results Branch PAA	Performance Indicators
<p>Reduced risks to health and safety, and improved protection against harm associated with workplace and environmental hazards and consumer products (including cosmetics)</p>	<ul style="list-style-type: none"> ◆ Percentage of federal public employees remaining at work through and following an injury, illness or traumatic incident ◆ Treasury Board of Canada Secretariat Statistics on leave, accommodation and injury in the workplace ◆ Level of client satisfaction with occupational health and contingency planning services ◆ Client satisfaction surveys ◆ Percentage of Canadians who are aware that their health can be affected by environmental factors ◆ Level of reported incidences of product related deaths and injuries associated with: Consumer Products; Cosmetics; Workplace Chemicals; New Chemical Substances; Products of Biotechnology; Radiation-Emitting Devices; Environmental Noise; Solar UV Radiation.
<p>Reduced health and safety risks associated with tobacco consumption and the abuse of drugs, alcohol and other substances</p>	<p>Prevalence of drug and substance abuse in Canada</p> <ul style="list-style-type: none"> ◆ Canadian Alcohol and Drug Use Monitoring Survey <p>Smoking prevalence in Canada</p> <ul style="list-style-type: none"> ◆ Reduce smoking prevalence from 25% to 20%, Canadian Tobacco Use Monitoring Survey

Key Programs and Services

Tobacco Control

Description: As lead department for the Federal Tobacco Control Strategy, Health Canada supports the four pillars of prevention, cessation, protection and harm reduction. Health Canada works with partners to pilot and evaluate a range of stop smoking approaches. For instance, the Department develops and implements national and regional education campaigns that inform Canadians about the health impacts of smoking and that provide information and referrals to help more Canadians quit smoking, and reduce exposure to second hand smoke in public and private spaces. On the international front, Health Canada, through its International Affairs Directorate, supports tobacco control initiatives around the globe.

Expected Results	Performance Indicators
Reduce smoking prevalence among the Canadian population to 20%	Smoking prevalence rate <ul style="list-style-type: none">♦ Measured by Canadian Tobacco Use Monitoring Survey (CTUMS)
Reduce number of cigarettes sold in Canada by 30%	Consumption rates – number of cigarettes sold in Canada <ul style="list-style-type: none">♦ Measured by industry reports

2006-2007*		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
53.8	282	53.6	282	53.7	282

*All financial figures in millions of dollars

In Manitoba and Saskatchewan, the Tobacco Control Programme will continue to ensure that the nationally-recognized Retailer Toolkit developed in Saskatchewan (preventing sales to minors, etc.) will be adapted for use with First Nations retailers on reserves. Tobacco Enforcement Officers work hand-in-glove with Prevention, Cessation and Education Program managers and community based organizations. Innovation and partnerships account for consistently high *Tobacco Act* compliance rates among retailers in the Region.

Department will analyse the outcomes from strategic planning sessions and consultations held with partners during the previous fiscal year. The knowledge derived from this evaluation will help us to most effectively focus Tobacco Control resources and activities for the future.

While considerable inroads have been made in reaching our targets and reducing smoking prevalence to 20% of the population, certain segments of the Canadian population continue to experience persistently high tobacco use, and further improvements to the smoking prevalence rate will depend upon addressing tobacco use among this population. Historically, young adults aged 20 to 24 have had the highest rates of smoking as compared with rates for all other age groups in the Canadian population, and this trend continues. For the first half of 2005, the smoking prevalence for those aged 20 to 24 was 27% as compared to 20% for the entire population 15 years of age and older (CTUMS). Therefore, the Department will focus its attention on youth and young adults who are most at risk of smoking, and will work with the

Key Initiatives

As part of our commitment to monitor and report on the progress and success of the tobacco control initiative, Health Canada will conduct an evaluation of the first five years of the Federal Tobacco Control Strategy. In order to determine the direction for tobacco control over the next five years, the

provinces and territories to identify appropriate interventions and future directions for this important demographic. We will also provide support for targeted prevention and cessation activities of the no-smoking message through youth engagement initiatives, such

as Health Canada's "Youth Action Committee on Tobacco", which will engage youth from across the country to help young people in their schools and communities live smoke-free.

Drug Strategy and Controlled Substances

Description: Health Canada administers the *Controlled Drugs and Substances Act* (CDSA) and its regulations, develops harm reduction and promotion strategies to combat alcohol and drug abuse (including health promotion activities targeted at youth), and provides expert scientific advice and drug analysis services to law enforcement agencies. Health Canada leads Canada's Drug Strategy, which was renewed in 2003. The Strategy is designed to coordinate and enhance substance abuse programs across the country, and strengthen knowledge and partnerships in the areas of prevention, treatment, harm reduction and enforcement to create healthier Canadians and communities.

Health Canada uses a variety of partnerships and funding vehicles to fulfill its mandate in this area. The Drug Strategy Community Initiatives Fund (DSCIF) was recently established to fund initiatives at the national, regional, provincial/territorial and local levels in two broad areas: health promotion and prevention, and harm reduction. DSCIF is delivered through Health Canada's national and regional offices and Northern Secretariat, with an overall aim to address problematic substance use and to promote public awareness of alcohol and other drug issues. The Alcohol and Drug Treatment and Rehabilitation Program (ADTR) aims to improve treatment for women and youth who are dealing with substance abuse problems. Health Canada also provides funding for the treatment component of Drug Treatment Courts.

Expected Results	Performance Indicators
Reduced health and safety risks associated with the abuse of drugs, alcohol and other controlled substances by managing the <i>Controlled Drugs and Substances Act</i> and its Regulations, and providing national leadership for Canada's Drug Strategy.	<ul style="list-style-type: none">◆ Reduced prevalence rate of substance use/abuse in Canada and among target populations such as youth◆ Level of misuse/abuse of controlled substances◆ Change in the type and level of health-related, at-risk behaviours◆ Change in the nature and level of the social, health and economic costs associated with substance use and abuse in Canada

2006-2007*		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
65.1	347	64.8	347	65.0	347

*All financial figures in millions of dollars

Key Initiatives

Advancing the National Framework for Action to Reduce the Harms Associated with Alcohol and Other Drugs and Substances in Canada continues. Key planned components include the initiation of the Canadian Alcohol and Drug Use Monitoring Survey; the development of a National Alcohol Strategy; the implementation of the National Strategy to Combat the Production and Distribution of Marijuana and Synthetic Drugs and the Diversion of Precursor

Chemicals; the development of a national and integrated approach to psychotropic pharmaceuticals; and the establishment of single website access to information about Canada's Drug Strategy. There will be an increase in research done in Canada on drug and alcohol abuse, and a detailed analysis of the Canadian Addiction Survey (CAS) of unique components (e.g., alcohol, youth, etc.) in order to support sound, evidence-based decision-making.

We will develop a strategy to enhance our inspection capacity for compliance with the *Controlled Drugs and Substances Act (CDSA)* and its regulations, in particular the *Precursor Control Regulations*. From a regional perspective, we will work on the provincial Alberta Methamphetamine Partnership Strategy Committee on Illicit Drug Use.

Marihuana is categorized as a controlled substance. The *Marihuana Medical Access Regulations* allow people who are suffering from grave and debilitating illnesses access to marihuana. It is important to note that the Regulations deal exclusively with the medical use of marihuana. Through authority of the *Marihuana Medical Access Regulations*, we will proceed with the development of a pilot project to assess the feasibility of distributing marihuana for medical purposes through the conventional pharmacy-based drug distribution system.

Health Canada will continue to operate four regional Drug Analysis Service (DAS) laboratories located in British Columbia, Manitoba, Ontario and Quebec. The DAS programme has three principal business lines: Drug Analysis, which includes regular identification of seized police exhibits; support in clandestine laboratory investigations (illicit drug manufacturing); and training to our clients (police, crown attorneys). We assess approximately 100,000 samples per year in the four facilities for law enforcement. Such work helps to support the Enforcement element of Canada's Drug Strategy, along with Prevention, Harm Reduction and Treatment. The Ontario laboratory also provides drug standards for the four DAS laboratories across Canada, and, in 2005, was the first to make an application for accreditation to the International Organization for Standardization (ISO) 17025 standard.

Safe Environments

Description: The environment continues to be a key determinant of health for all Canadians. Recent studies demonstrate that environmental factors contribute to a number of health problems. Air pollution, for example, is a factor in 5,900 deaths per year in Ontario and is responsible for 30% of asthma and 5% of cancers in children. Improving the health of Canadians by addressing environmental factors will strengthen their quality of life. The Safe Environments Programme promotes and protects the health of Canadians by identifying, assessing and managing health risks posed by environmental factors in living, working and recreational environments. The scope of activities encompassed within this area includes research on drinking water, air quality, contaminated sites, climate change, and vulnerable populations assessment of risks from environmental impacts, as well as preparedness for environmental emergencies. Health Canada is also the lead for coordinating Canada's preparedness for nuclear emergencies under the Federal Nuclear Emergency Plan.

Expected Results	Performance Indicators
Availability and Canada-wide adoption of measures to control the risks to human health posed by environmental contaminants	♦ Percentage of completion of legislated obligations and other commitments
Increased knowledge, understanding and involvement by Canadians in environmental health issues	♦ Percentage of Canadians who are aware that their health can be affected by environmental factors
Science-based decision-making within Canada regarding health risks of environmental contaminants**	** Please Note: Work is in progress to develop a better set of indicators for these expected results by Fall 2006
Improved scientific knowledge and capacity within the Canadian scientific community and international collaboration on environmental health issues to ensure that Canadians have increased confidence in environmental health information and protection mechanisms*	

2006-2007*		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
68.4	576	68.1	582	68.3	584

*All financial figures in millions of dollars

Key Initiatives

Health Canada's Sustainable Development Strategy (2004-2007) reflects our commitment to protect the health of Canadians from environmental threats. Under this strategy, the department will advance the development of the *Guidelines for Canadian Drinking Water Quality*, and an integrated source-to-tap approach to drinking water quality in Canada. In collaboration with other federal departments, Health Canada will develop a "Federal Waterborne Contamination and Illness Response Protocol" to ensure a coordinated and systematic federal approach to dealing with outbreaks of waterborne illness and contamination of drinking water. Health

Canada is also partnering with all three levels of government on the Technical Advisory Committee on Safe Drinking Water (TACSDW) to effectively address public health issues pertaining to drinking water in Alberta.

To assist in monitoring health risks attributable to changes in air quality, the Department will continue to build on its recently completed collaborative international research to develop an Air Health Indicator and will release the Air Quality Benefits Assessment Tool to help quantify the health impacts of changes in air pollution. In particular, the Safe Environments Programme in Ontario and Region is working to support the Canada-United States Border

Air Quality Strategy, and will examine the impacts of air pollution on the health of children and other vulnerable populations, such as pregnant women and diabetics, in the Great Lakes Basin region. Health Canada will also complete and disseminate the Canadian Climate Change and Health Vulnerability Assessment in 2007, which will assess climate change impacts on human health and well-being.

To protect the health of Canadians from environmental contaminants, Health Canada will make additional progress under the *Canadian Environmental Protection Act, 1999* (CEPA) by completing the identification and prioritization ("categorization") of the 23,000 Existing Substances on the Domestic Substances List. The Domestic Substances List (DSL) is a compilation of about 23,000 substances used, imported or manufactured in Canada for commercial use.

In partnership with the Public Health Agency of Canada and working through the joint Emergency Preparedness Sub-Committee on Chemical Emergencies, we will develop a joint Health Portfolio response plan for chemical emergencies in 2006 - 2007. Health Canada is also working with its provincial counterparts to strengthen guidelines to protect the health of Canadians in the event of a nuclear emergency, and will be participating in international nuclear emergency exercises to assess the implications of implementing radiation contamination counter-measures.

In the Alberta Region, Health Canada, with the support of the Health Innovation Fund, is addressing the impact and influence of the state of the environment on children's health in the region. A one-day symposium presently under development with participation from federal, provincial, territorial and other partners, will provide a forum to exchange knowledge related to research, policy and best practices in the area of children's health and the environment.

Product Safety

Description: As part of our legislative mandate, Health Canada identifies, assesses, manages and communicates to Canadians the health and safety hazards and health risks associated with: consumer products; hazardous workplace materials; cosmetics; new chemical substances; products of biotechnology; radiation produced by radiation emitting devices; environmental noise; and solar UV radiation.

To carry out this mandate, we advance critical research, carry out needed risk assessments and develop risk management strategies to minimize the exposure of Canadians to toxic substances in consumer, commercial, personal care and pharmaceutical products. The Department annually carries out health risk assessments of approximately 800 new chemicals and products of biotechnology notified under the *New Substances Notification Regulations* of the *Canadian Environmental Protection Act, 1999*. When a significant risk is identified, control measures are imposed. We identify which of the *Food and Drugs Act* substances in Canadian commerce between 1987 and September 2001 require priority assessment, and work with stakeholders on the process for notification of these substances. The Department also carries out screening level health risk assessments on existing micro-organisms, and both environmental and health risk assessments on new *Food and Drugs Act* substances, including risk management when necessary.

Health Canada's National Office of Workplace Hazardous Materials Information System (WHMIS) provides leadership to its federal, provincial and territorial MOU partners regarding effective hazard communication of workplace chemicals, including the delivery of training for WHMIS inspectors across the country. In addition, the Department will continue its involvement and participation in standardization work to ensure continued improvement of radiation emitting equipment safety.

Expected Results **	Performance Indicators
Reduced risk of death and injury from exposure to hazardous products and substances associated with: Consumer products; cosmetics; workplace chemicals; new chemical substances; products of biotechnology; radiation-emitting devices; environmental noise; solar UV radiation.	<ul style="list-style-type: none"> ◆ Level of reported incidences of product related deaths and injuries; ◆ Level of exposure to hazardous products and substances associated with: consumer products; cosmetics; workplace chemicals; new chemical substances; products of biotechnology; radiation-emitting devices; environmental noise; and solar UV radiation.

2006-2007*		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
25.6	334	25.5	334	25.5	334

*All financial figures in millions of dollars

Key Initiatives

In support of the government's commitment to the health of children, we will proceed with the implementation of the Lead Risk Reduction Strategy (LRRS) for Consumer Products. These measures will protect the health of Canadians by reducing health risks related to lead exposure. Lead is hazardous to health and is particularly dangerous for infants and young children because they are more susceptible to its harmful effects. The LRRS proposes maximum lead content limits for four categories of consumer products with which children are likely to interact. Regulations for each category will be developed separately, moving first on product groups where the risk to children is greatest. We will also check for compliance rates for products already regulated for lead content. Performance will be based on the removal of such hazardous products from the Canadian marketplace and the level of public awareness of risks.

Other regulatory and educational activities will also support the commitment to the protection of children's health. For example, to protect the health of children and reduce strangulation hazards that are associated with flexible loops employed in the manufacture and use of window covering products (mini-blinds and curtains), regulations will be developed to require mandatory adherence by importers, advertisers and retailers to safety standards for these corded window covering products.

To effectively manage the continuing incidence of skin cancer, we need to ensure that children develop healthy behaviours with regards to their outdoor activities. The best time to influence or change behaviours is at the time the behaviour is being

established. This is the fundamental driver for the Sun Awareness Project, a school-based outreach program to teach primary school children and teenagers of both the benefits of sun exposure and the risks associated with excessive sun exposure. The Sun Awareness Project involves learning elements and exercises integrated into the regular teaching schedule at both primary and secondary schools.

At the World Summit on Sustainable Development in 2002, Canada made a commitment to fully implement the Globally Harmonized System (GHS) of Classification and Labelling of Chemicals by 2008. The GHS is viewed globally as the basis for the sound management of chemicals, and enhances the protection of human health and the environment by harmonizing chemical hazard classification and communication internationally. Building on stakeholder consultations on the GHS, Health Canada will make further progress toward carrying out the legislative and regulatory changes needed for full implementation by 2008.

In carrying out our responsibilities under the *Canadian Environmental Protection Act, 1999*, a priority will be placed on working with Environment Canada to develop regulatory amendments to the *New Substances Notification Regulations (Organisms)* that reflect changes in the regulatory, policy and science environment, such as the production of transgenic, chimeric and cloned animals (e.g., livestock). In addition, we will work to develop appropriate environmental regulations for substances in products that are regulated under the *Food and Drugs Act*.

Workplace Health & Public Safety

Description: The Workplace Health and Public Safety Programme (WHPSP) provides services to protect the health and safety of the federal public sector, the travelling public, dignitaries visiting Canada, and others. It also establishes and promotes national workplace health and safety policies.

Health Canada will continue to provide occupational health services to nearly 200,000 federal employees working in Canada and overseas for approximately 100 departments and agencies. Health Canada delivers Employee Assistance Program services on a cost recovery basis to approximately 143 Canadian public and para-public sector organizations. Through the International Health Bureau, Health Canada provides emergency health services to Internationally Protected Persons and their families while they are on official visits to Canada.

The health of those who travel within Canada is protected through voluntary inspection programs for passenger conveyances to address public health risks relating to food, water and sanitation. Potable water regulations provide some authorities for inspection and enforcement of water quality on conveyances. As well, under the *Quarantine Act* and in fulfilment of WHO International Health Regulations, WHPSP Environmental Health Officers are responsible for inspecting and assessing conveyances, goods and cargo, and ordering the detention, remediation, removal and destruction when necessary to protect against the transmission of communicable quarantinable diseases.

Expected Results		Performance Indicators			
Healthy Public Service		<ul style="list-style-type: none">◆ Percentage of federal public employees remaining at work through/and following an injury, illness and/or traumatic incident (Treasury Board of Canada Secretariat Statistics on leave, accommodation and injury in the workplace)◆ Client satisfaction with occupational health and contingency planning services (client satisfaction surveys)◆ Percentage occurrence of incidents of gastrointestinal diseases on cruise-ships with a target of less than 2% of passengers and crew			
Improved Public Health for the Travelling Public					
2006-2007*		2007-2008		2008-2009	
\$	FTEs	\$	FTEs	\$	FTEs
24.5	417	24.4	418	24.5	419

*All financial figures in millions of dollars

Key Initiatives

In light of newly emerging health threats, Health Canada works with the Public Health Agency of Canada (PHAC), Public Security and Emergency Preparedness Canada, and other organizations to plan, prepare and implement physical and psycho-social emergency responses to national health emergencies such as pandemic influenza and terrorist or suspected terrorist attacks. Health Canada supports departments and agencies in their emergency

preparedness and response activities through the provision of advice, guidance, training, health evaluations, prophylaxis and immunizations and will continue to support PHAC with environmental quarantine services. We will also continue to offer psycho-social services in support of federalized emergency responders and federal public employees who provide essential services during and immediately following critical incidents.

We will develop approaches to better identify and manage mental health and addictions in the workplace. Areas of activity will focus on: preventing and mitigating mental disorders and addictions among federal employees through mental health promotion, early identification and referral; a disability case management program; and the development and implementation of a comprehensive federal workplace health strategy.

Web Links

Tobacco

www.hc-sc.gc.ca/hl-vs/tobac-tabac/index_e.html

Canada's Drug Strategy

www.hc-sc.gc.ca/ahc-asc/activit/strateg/drugs-droques/index_e.html

Marihuana Medical Access Regulations

www.hc-sc.gc.ca/dhp-mps/marihuana/index_e.html

Scheduling of a number of controlled substances and development of other proposed amendments to the *Precursor Control Regulations*

www.hc-sc.gc.ca/dhp-mps/substancontrol/index_e.html

Reducing the supply of and demand for drugs through prevention, harm reduction, treatment and enforcement programming.

www.hc-sc.gc.ca/ahc-asc/activit/strateg/drugs-droques/index_e.html

National Framework for Action on Substance Use and Abuse.

www.hc-sc.gc.ca/ahc-asc/activit/strateg/drugs-droques/nfa-can/index_e.html

National Research Agenda

www.hc-sc.gc.ca/ahc-asc/activit/strateg/drugs-droques/nat-res-rech/index_e.html

Drug Strategy Community Initiatives Fund

www.hc-sc.gc.ca/dhp-mps/substan/fond-comm-fund/index_e.html

Canada's Drug Strategy Campaign publications

www.hc-sc.gc.ca/ahc-asc/pubs/drugs-droques/index_e.html

Climate Change

www.hc-sc.gc.ca/ewh-semt/climat/index_e.html

Air

www.hc-sc.gc.ca/ewh-semt/air/index_e.html

Water

www.hc-sc.gc.ca/ewh-semt/water-eau/index_e.html

Canadian Environmental Protection Act

www.hc-sc.gc.ca/iyh-vsv/envIRON/cepa-lcpe_e.html

Healthy Living Initiative

www.msc-smc.ec.gc.ca/education/uvindex/index_e.html

Globally Harmonized System

www.hc-sc.gc.ca/ahc-asc/intactiv/ghs-sgh/index_e.html

Lead Risk Reduction Strategy

http://hc-sc.gc.ca/ewh-semt/contaminants/lead-plomb/risk-reduction-risques_e.html

Workplace Health

www.hc-sc.gc.ca/ahc-asc/branch-dirgen/hecs-dgsesc/whpsp-psstsp/index_e.html

* Other programs and services that contribute to this program activity total \$52.5 million for 2006-2007

Program Activity – Pest Control Product Regulation

This program activity contributes to the Government of Canada Strategic Outcome: Healthy Canadians with Access to Quality Health Care.

PLANNED SPENDING AND FULL-TIME EQUIVALENTS (FTEs)				
(\$ millions)	Forecast Spending 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Gross expenditures	60.5	58.6	58.2	54.1
Less: Expected responsible revenues	5.9	7.0	7.0	7.0
Net expenditures	54.6	51.6	51.2	47.1
FTEs	675	652	656	604

Notes: The decrease in expenditures from 2005-2006 to 2006-2007 is mainly due to the Expenditure Review Committee (ERC) reduction.

The decrease in expenditures from 2006-2007 to 2008-2009 is mainly due to a decrease in the level of funding for Building Public and Stakeholder Confidence in Pesticide Regulation initiative.

Figures include an amount for other departmental and regional infrastructure costs supporting program delivery.

Program Activity Description

Health Canada's program activity, Pest Control Product Regulation, protects human health and the environment by minimizing risks associated with pesticides imported, sold, or used in Canada. The activity is strengthened through the use of sound, progressive science, modern risk assessment, risk management approaches and innovative approaches to sustainable pest management.

Science is the foundation for Health Canada's activities related to *Pest Control Product Regulations*. We conduct assessments of risk to human health and the environment arising from exposure to chemical and biological pesticides as well as assessments of the value of these products. In support of this work, we develop assessment methodologies, pesticide testing protocols, risk reduction strategies and risk management tools. Scientific expertise is in place in the following areas: toxicology, environmental toxicology, analytical chemistry, environmental fate and chemistry, biochemistry, endocrinology, ecology, crop science, plant pathology, entomology, occupational and bystander assessment, and aggregate and cumulative assessment.

To meet the primary objective of this program activity "to protect the health of Canadians and the environment from unacceptable risks associated with pest control products", we collaborate with experts in a variety of disciplines throughout the Health Portfolio and with the five natural resource departments. We also work with: the Canadian Food Inspection Agency and provincial governments on compliance activities; with Agriculture and Agri-food Canada to develop risk reduction strategies and improve access to specialized pest control; and with a federal interdepartmental working group on pesticide research and monitoring. This working group provides the opportunity for us to discuss our research and monitoring needs, as well as obtain information on the levels of pesticides in the environment, effects on human health and the environment, testing protocols, risk reduction practices, pest control alternatives, and pesticides for minor use. It also gives our partners the opportunity to effectively link their research results to regulatory decisions, and, at the same time, it will improve our regulatory decision making process for pesticides.

Advisory groups play an important role in decision-making at Health Canada. The Minister's Pest

Management Advisory Council allows for dialogue between stakeholders and Health Canada. The Economic Management Advisory Committee provides strategic advice on improving efficiency and cost effectiveness, and the Federal, Provincial, Territorial Committee on Pest Management and Pesticides helps strengthen federal, provincial and territorial relationships in the area of pest management and pesticides. The Committee also provides advice and direction to federal, provincial, and territorial governments on programs, policies and issues.

The major human resource challenge for this program activity is to keep up with the pace of growing scientific knowledge and industry innovation. We will need to continue to recruit additional resources that have the appropriate knowledge base, and develop and train staff in a number of scientific disciplines.

This program activity has three main objectives: protected health and environment; increased use of reduced risk pest management practices and products; and increased public and stakeholder confidence in pesticide regulation. To achieve these objectives we focus on five main activities that respond to a number of challenges facing Health Canada such as consumer demands, globalization, and rapid scientific and technological change.

They are:

1. Regulatory Improvement

The new *Pest Control Products Act*, which came into force June 28, 2006, will strengthen health and environmental protection by enshrining in legislation modern risk assessment and risk management approaches that are currently applied as a policy matter. These include specific protection for infants and children, accounting for pesticide exposure from all sources (including food and water), and considering cumulative effects of pesticides that act in the same way. It will also continue to support pesticide risk reduction by ensuring that only pesticides that make a useful contribution to pest management are registered and by expediting the registration of lower-risk products. The registration system will be made more transparent by

establishing a public registry to allow access to test data detailed evaluation reports on registered pesticides. Health Canada will continue to share scientific results on pesticides with provincial, territorial and international regulators to enhance the process for international joint reviews of pesticides. We will share sustainable pest management practices with provinces and territories to enhance agricultural stewardship. As a result, Canadian growers will have improved access to newer and safer pesticides so they can be more competitive in the marketplace.

In addition, the new *PCPA* will strengthen post-registration controls for all products. These requirements include: reporting by pesticide companies of adverse effects related to their pesticide products; re-evaluation of older chemicals on a cyclical basis; public transparency regarding the basis of regulatory decisions; and ensuring in legislation the special review program to address potential identified specific concerns for registered products.

To support the need to provide Canadians with a transparent and participatory regulatory process, we will transform our work from traditional business interfaces and information delivery practices to interactive, web-based practices. This transformation will allow information to be delivered, stored, accessed, retrieved, exchanged and used more effectively and efficiently, and will lead to more efficient and cost-effective management of the regulatory process.

2. New Pest Control Product Registration

New pesticides undergo an extensive pre-market assessment by Health Canada to ensure their use poses no unacceptable risks. This includes an assessment of human health risk (including worker and bystander exposure), food residues, environmental risk (including environmental fate and potential effects on wildlife), and an assessment of value. Assessments are carried out using the most modern scientific methods available and meet international best practices.

To provide for continual updating of our assessments, we are participating in a joint review program with the United States through NAFTA that is being expanded globally through the Organisation for Economic Co-operation and Development (OECD). This furthers the goals of timely registrations, harmonization and work sharing efforts to ensure pesticide risk assessments are efficient and benefit from the best science available internationally. Public consultation will continue to be used routinely for the development of major science policies and for registration decisions.

3. Registered Pest Control Product Evaluation

We re-evaluate older pesticides currently on the market to determine if their continued use is acceptable in consideration of modern data and current scientific approaches. Significant public consultation is undertaken on risk assessments and risk management proposals to engage stakeholders, including registrants, other government departments, growers and their associations, other non-governmental organizations, as well as the general public.

Risk mitigation measures will continue to be implemented where required to address concerns regarding risks that could emerge during the re-evaluation of a chemical. As required, under the *PCPA*, we will continue to work with the Environmental Protection Agency in the United States on a proposed approach to re-evaluation and develop a plan to work cooperatively on future re-evaluations.

4. National Pesticide Compliance Program

We have the ongoing responsibility to help protect the health of Canadians and their environment by facilitating, encouraging and maximizing compliance with the *PCPA* and its regulations. Where non-compliance is detected, we apply the appropriate enforcement (e.g., education, monetary penalties or prosecution). Health Canada promotes and monitors compliance with the *Act* and Regulations principally through its National Pesticide Compliance Program (NPCP).

The NPCP includes programs that address regional, multi-regional or national compliance and enforcement problems and issues. Much of this work is accomplished through a regional network of designated officials who inspect and investigate those who manufacture, distribute and use pesticides. An example of compliance activities is the monitoring of pesticide use in grape and blueberry production that will be done this coming year. Other pesticides will be monitored as issues arise.

In addition, we will continue to work in partnership with provincial and other federal regulators and will explore further opportunities for coordination and collaboration with international organizations. Specifically, in 2006-2007 Health Canada plans, through an OECD workshop, to continue to develop performance indicators for the compliance area.

5. Pesticide Risk Reduction in Agriculture

The Pesticide Risk Reduction Program supports the objectives of the new *Pest Control Products Act* to facilitate access to reduced risk products and enhance sustainability in agriculture. It is a grower-led, commodity-based program that is jointly facilitated by the Sustainable Pest Management Section of the Pest Management Regulatory Agency and the Pest Management Centre of Agriculture and Agri-Food Canada (AAFC). The goal of the program is to improve the sustainability of Canadian agricultural commodities through the development and implementation of commodity-based risk reduction strategies. Benefits resulting from this program will include the development and adoption of alternative pest management practices through applied research into reduced risk alternative tools and biopesticides.

AAFC and Health Canada will continue working with stakeholders to develop commodity-specific pesticide strategies for twenty priority crops including apples, potatoes, dry beans and greenhouse vegetables. Active stakeholder participation in building and implementing strategies is critical to the success of the program.

Performance Measurement Strategy

Expected Results	Performance Indicators
Access to safer pesticides	<ul style="list-style-type: none">◆ Number of new reduced risk active ingredients available for use in Canada◆ Percentage of reduced risk chemicals and percentage of biopesticide active ingredients registered/pending registration in the U.S. that are registered/pending registration in Canada◆ Number of new active ingredients registered through the PMRA/U.S. EPA Joint Review or work share program◆ Number of active ingredients addressed through re-evaluation
Strengthened compliance with PCPA and Regulations	<ul style="list-style-type: none">◆ Feedback from public and stakeholders
Users informed of reduced risk practices	<ul style="list-style-type: none">◆ Number of proposed and final regulatory decisions posted on the website
Transparency of pesticide regulation	<ul style="list-style-type: none">◆ Implementation of reading rooms and adverse effects reporting
Improved regulatory efficiencies and cost effectiveness	<ul style="list-style-type: none">◆ Efficiency gains achieved through electronic processes and harmonization permit the integration of new science policies and methodologies◆ Feedback from public/stakeholders
Informed public and stakeholders	<ul style="list-style-type: none">◆ Number of web hits◆ Number of responses provided to the public through the Pest Management Information Service

Web Links

Pest Management Regulatory Agency (PMRA)
home page: www.pmr-arla.gc.ca

PMRA Strategic Plan 2003-2008
www.pmr-arla.gc.ca/english/pdf/plansandreports/pmr-strategicplan2003-2008-e.pdf

STRATEGIC OUTCOME:

Better Health Outcomes and Reduction of Health Inequalities Between First Nations and Inuit and Other Canadians

Program Activity – First Nations and Inuit Health

This program activity contributes to the Government of Canada Strategic Outcome: Healthy Canadians with Access to Quality Health Care.

PLANNED SPENDING AND FULL-TIME EQUIVALENTS (FTEs)				
(\$ millions)	Forecast Spending 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Gross expenditures	1,930.8	2,124.6	2,139.7	2,159.2
Less: Expected spendable revenues	3.4	5.5	5.5	5.5
Net expenditures	1,927.5	2,119.1	2,134.2	2,153.7
FTEs	2,722	2,884	2,883	2,857

Notes: The increase in expenditures from 2005-2006 to 2006-2007 is mainly due to the yearly growth of the Indian Envelope and an increase in the funding level for the Follow-Up to the Special Meeting of First Ministers and Aboriginal Leaders (September 12, 2004). This increase is partially offset by the Expenditure Review Committee (ERC) reduction.

The increase in the expenditures from 2006-2007 to 2007-2008 is mainly due to the yearly growth of the Indian Envelope and an increase in the funding level for the Follow-Up to the Special Meeting of First Ministers and Aboriginal Leaders (September 12, 2004). This increase is partially offset by the Expenditure Review Committee (ERC) reduction.

The increase in expenditures from 2007-2008 to 2008-2009 is mainly due to the yearly growth of the Indian Envelope. This increase is partially offset by a decrease in funding for the sunset of the Implementation of the First Nation Water Management Systems initiative.

The change in the FTEs is due to the increase of the salary component of the operating budget.

Figures include an amount for other departmental and regional infrastructure costs supporting program delivery.

Program Activity Description

The objectives of Health Canada's First Nations and Inuit health program activity are improving health outcomes, ensuring the availability of and access to quality health services, and supporting greater control of the health system by First Nations and Inuit.

To achieve these goals, the Department must face many of the same challenges as other Canadian health care providers such as increasing costs, health human resource shortages and an aging population. The First Nations and Inuit health system has additional challenges due to rapidly growing populations with a higher than national average rate of injuries and disease burden, and a population living largely in remote and rural areas.

Within this context, Health Canada will focus on four key priority areas in 2006-2007: continuing to provide health-related programs and services; improving quality and access to health-related programs and services; promoting healthy living and disease prevention; and improving accountability and performance measurement. These priorities recognize the importance that determinants of health such as education and family income play in improving health outcomes, as well as the need for innovation in the field of health. They will also be informed by a government review of the health commitments of the 2005 Meeting of First Ministers and Aboriginal Leaders.

Continued health-related programs and services

Health Canada provides a range of First Nations and Inuit health programs and services that will continue into 2006-2007. In partnership with First Nations and Inuit, we will continue to provide primary health care services in approximately 200 remote communities by approximately 600 nurses through nursing stations and community health centres in remote and/or isolated communities. Through our regional offices, we also deliver programs focussed on children and youth, mental health and addictions, chronic diseases, environmental health, and communicable and non-communicable disease prevention. These services supplement and support the services that provincial, territorial and regional health authorities provide.

The Non-Insured Health Benefits (NIHB) coverage of drugs, dental care, vision care, medical supplies and equipment, short-term crisis intervention mental health services, and medical transportation will continue to be available to all 765,000 registered Indians and recognized Inuit in Canada, regardless of residency.

Health Canada works closely with our health partners and other federal departments. We support the Public Health Agency of Canada in its delivery of Children and Youth programming through the Aboriginal Head Start in Urban and Northern Communities program as well as a number of pan-Aboriginal programs. We also work closely with Indian and Northern Affairs Canada through the First Nations Water Management Strategy to ensure that all First Nations communities across Canada have access to a safe and reliable water supply.

Improving quality of and access to health-related programs and services

The key elements of this priority include: working towards seamless integration of services; increasing the number of Aboriginal health professionals; support for accreditation; improved community dental capacity; and capital improvements and investments.

We will work to make progress towards better integration of federal, provincial and territorial health programming and services to First Nations and Inuit and to ensure that services meet the needs of Aboriginal peoples. This will include implementation of the Aboriginal Health Transition Fund, which was designed to enable federal, provincial and territorial governments, First Nations governments who deliver health care services, and Aboriginal communities to devise new ways to integrate and adapt existing health services. Attention will also be given to implementation of best practices and lessons learned from a series of Health Integration Initiative pilot projects.

Health Canada in the Atlantic Region is assisting the Innu communities of Labrador to develop their capacity to manage and control health programs. In an effort to strengthen community-based health services and to reduce health status inequities, Labrador-based Health Canada staff are working with the Mushuau Innu First Nation in the planning of a healing lodge and wellness centre, and with the Sheshatshiu Innu First Nation in the development of a community health survey and a training plan for addictions treatment staff.

Health Canada will continue to fund the Aboriginal Health Human Resources Initiative to increase the long-term supply of First Nations, Inuit and Métis health professionals. In order to focus on Aboriginal youth, scholarship and bursary funds will be made available to eligible youth who pursue post-secondary studies in health support. To meet the continuing challenge of recruitment and retention of nurses to support health services in communities, we will provide ongoing professional development and continuing education opportunities. In partnership with the Canadian Nurses Association, we will launch a National Nursing Portal to provide critical support to nurses in rural and remote areas.

Health Canada will also continue to support the development and implementation of First Nations and Inuit accreditation and quality improvement activities. This will increase the number of accredited health care services in First Nations communities and ensure that the health care provided is responsive to the needs of the communities. We will also continue to implement, in selected communities, the Children's Oral Health Initiative to improve the oral health of First Nations children. This will focus on increasing the awareness of preventive oral health care and positive self-care practices for parents and caregivers, and will serve to increase the capacity of communities to deliver and maintain dental public health initiatives.

Finally, Health Canada supports the construction, operation, maintenance and environmental management of on-reserve health facilities and staff residences. In 2006-2007, fifteen health facilities will be constructed or expanded, and recapitalization initiatives (repairs, replacements, upgrades) will improve the working environment of clients and staff, and enhance the quality of health care services offered at the community level. In 2006-2007, Health Canada will also invest \$1.2 million in environmental remediation and assessment to ensure operations of health facilities in First Nations communities meet environmental codes and requirements and are consistent with the Department's commitments to sustainable development.

Promoting healthy living and disease prevention

This priority focuses on maternal and child health, mental wellness, suicide prevention, prevention of chronic disease, communicable disease readiness, and safe drinking water. Initiatives have been put in place, such as a Maternal and Child Health (MCH) program to further expand and enhance the continuum of services provided and to improve health and social outcomes for pregnant women and families with infants and young children within a targeted number of First Nations and Inuit communities. In 2006-2007, Health Canada will continue to expand the number of sites and spaces available for Aboriginal Head Start On Reserve (AHSOR) children and will provide training to AHSOR workers.

Health Canada will oversee the development of a strategic action plan in 2006-2007 to improve mental wellness outcomes for First Nations and Inuit. Among other issues, the strategic action plan will guide Health Canada's efforts to more effectively position its current programming so that they are better able to serve the diverse needs of Aboriginal communities.

We will also continue to implement the National Aboriginal Youth Suicide Prevention Strategy (NAYSPS). This new strategy will establish projects in a targeted number of Aboriginal communities, where it will focus on building a solid foundation for effective approaches for preventing youth suicide. The activities supported by NAYSPS will include: skills training; tool and resource development; and primary prevention and awareness initiatives that promote mental wellness and youth resiliency. The strategy will also develop protocols to respond to communities in crisis and support various research projects. In addition to these new activities, Health Canada will continue to offer a continuum of mental health and emotional support services to former students of residential schools and their families as Canada renews its efforts to resolve Indian Residential School legal claims more expeditiously in 2006-2007.

Health Canada will continue its efforts to address high rates of chronic disease within the Aboriginal community. In particular, the Department will enhance the Aboriginal Diabetes Initiative by increasing the level of community-based funding that communities can access to expand promotion, prevention and care activities. Beyond our efforts to address diabetes, we will develop a First Nations and Inuit Chronic Disease Prevention Strategic Plan that will be developed in partnership with key stakeholders and experts and will inform the development of future chronic disease prevention approaches.

In light of federal responsibilities to protect First Nations communities against health risks associated with communicable diseases, Health Canada will begin to implement Communicable Disease Emergencies Plans. Efforts will be focussed on increasing emergency planning and response capacity at the regional

and community levels, strengthening collaborative relationships with provinces, territories and stakeholders and ensuring that emergency supplies are purchased and readily available to First Nations and Inuit communities. Health Canada will develop and pilot test Pandemic Influenza Plans in First Nations and Inuit communities by the end of 2006-2007.

Health Canada's Northern Secretariat, working in partnership with the Government of Nunavut and Nunavut Tunngavik Incorporated (NTI), will build on Nunavut's 2005-2006 Health Integration project to increase integration between federal and territorial health promotion programs at the community and territorial level and develop initiatives to strengthen community involvement in planning and delivery of wellness programming. This partnership also fulfils the intent of Article 32 of the Nunavut Land Claim Agreement to provide for Inuit participation in the development, design and delivery of programs.

Finally, through the Water Management Strategy, Health Canada will work in partnership with First Nations communities (except the Yukon and the Territories), to implement drinking water monitoring as per the *Guidelines for Canadian Drinking Water Quality*. This will involve the development of options and an action plan for the implementation of a regulatory regime for drinking water in First Nations communities. Health Canada will investigate potential drinking water problems and provide advice and recommendations to First Nations communities and federal partners such as Indian and Northern Affairs Canada. Health Canada is also actively involved in the development of community-based education and awareness activities on drinking water quality issues.

Improving accountability and performance measurement

Health Canada has developed a strategy to monitor, measure progress and report on program performance results. This includes establishing

In the B.C. Region, Health Canada will expand and accelerate the "Drinking Water Safety Program". The Program will focus on capacity building and certified training for community members responsible for water quality, and enhancing the surveillance, water quality analysis, and data management components of the program. Results of the program will include an increase in the number of trained and certified water quality operators; community water analysis programs that meet national guidelines; and a consistent, accurate and timely reporting system on water quality.

performance measurement strategies in consultation with the organizations delivering the services at the community level.

We will undertake efforts to improve health surveillance and information analysis, including data development, data analysis, research evidence to support priority-setting and decision-making on health-related investments. For example, as a further enhancement to the Aboriginal Diabetes Initiative, Health Canada will begin to support the development of an Aboriginal-specific diabetes research agenda and will increase the Department's surveillance activities in an effort to identify research priorities that will inform future diabetes programming.

Health Canada also draws information from evaluation and review studies on areas for improvement. In 2006-2007, we will conduct a joint evaluation with Indian and Northern Affairs Canada on the First Nations Water Management Strategy. The Department will also develop processes and tools and collect information for evaluating primary health care, immunization and mental health programs. It will finalize the evaluation of the Home and Community Care program.

Performance Measurement Strategy

The First Nations and Inuit Health program has established expected results and performance indicators to assess progress towards the achievement

of the strategic outcome. Use of the information below will contribute to providing a snapshot of the health status of First Nations and Inuit.

Expected Results	Performance Indicators
Strengthened community programs; better health protection; improved primary health care; and access to non-insured health benefits contribute to improved health status of First Nations and Inuit individuals, families and communities.	<ul style="list-style-type: none">◆ Life expectancy (at birth, on and off reserve)◆ Infant Mortality Rates◆ Birth weight◆ NIHB Client utilization rates

Key Programs and Services

The following describes six key program areas that Health Canada will continue to be engaged in throughout 2006-2007: children and youth; mental health and addictions; chronic disease and injury

prevention; environmental health and research; communicable disease control; and primary health care.

Children and Youth Programs

Description: These programs are designed to collectively improve the cultural, emotional, intellectual and physical growth and development of First Nations and Inuit infants, children and youth. Programs targeting maternal, infant and child health, increasing children's knowledge of language and culture, and increasing children's readiness for school are the main priorities of the Department's children and youth programming. These programs include: Aboriginal Head Start on Reserve; the Canada Prenatal Nutrition Program; the Fetal Alcohol Spectrum Disorder program; and the Maternal Child Health program.

Expected Results	Performance Indicators
Improved continuum of programs and supports in First Nations and Inuit communities Increased participation of First Nations and Inuit individuals, families, and communities in programs and supports	<ul style="list-style-type: none">◆ Number and percentage of communities with programs◆ Number and type of participants in programs by program type

2006-2007*		2007-2008*		2008-2009*	
\$	Salary \$	\$	Salary \$	\$	Salary \$
102.2	6.1	109.8	6.1	115.7	6.1

* Based on the PAA with adjustments for approved Treasury Board submissions. It was assumed that no growth would be applied to new funding and non-envelope funding. It was also assumed that 3% growth would be applicable to envelope funding. Only salary dollars was provided because the information on the number of FTEs is not available at this level.

** All financial figures in millions of dollars

Mental Health and Addictions Programs

Description: These programs provide culturally appropriate counseling services, addiction prevention and promotion services and mental wellness services that are largely delivered by Aboriginal people. These programs include: Building Healthy Communities; the Brighter Futures program; the National Native Alcohol and Drug Abuse Program (NNADAP) – Residential Treatment; the National Native Alcohol and Drug Abuse Program – Community based; the Youth Solvent Abuse Program; the First Nations and Inuit Tobacco Control Strategy; the National Aboriginal Youth Suicide Prevention Strategy; the Labrador Innu Comprehensive Healing Strategy; and the Indian Residential Schools-Mental Health Support Program.

Expected Results			Performance Indicators		
Improved continuum of programs and services in First Nations and Inuit communities			◆ Number of communities with programs (percentage of communities with programs)		
Increased participation of First Nations and Inuit individuals, families and communities in programs and services			◆ Number and type of participants in programs by program type		
			◆ Number of community health facilities by type		
2006-2007*		2007-2008*		2008-2009*	
\$	Salary \$	\$	Salary \$	\$	Salary \$
139.1	5.8	130.7	4.3	133.3	4.4

* Based on the PAA with adjustments for approved Treasury Board submissions. It was assumed that no growth would be applied to new funding and non-envelope funding. It was also assumed that 3% growth would be applicable to envelope funding. Only salary dollars was provided because the information on the number of FTEs is not available at this level.

** All financial figures in millions of dollars

Chronic Disease and Injury Prevention Programs

Description: These programs support the development and implementation of community-based activities that promote healthy lifestyle choices and support healthy and active living. Over the long term, these programs will contribute to the prevention of chronic disease and injuries within First Nations and Inuit communities across Canada. These programs include: the Aboriginal Diabetes Initiative; Nutrition and Physical Activity Promotion; and Injury Prevention.

Expected Results			Performance Indicators		
Improved continuum of programs and supports in First Nations and Inuit communities			◆ Number and percentage of communities with programs		
2006-2007*		2007-2008*		2008-2009*	
\$	Salary \$	\$	Salary \$	\$	Salary \$
34.9	2.8	45.1	2.8	50.1	2.8

* Based on the PAA with adjustments for approved Treasury Board submissions. It was assumed that no growth would be applied to new funding and non-envelope funding. It was also assumed that 3% growth would be applicable to envelope funding. Only salary dollars was provided because the information on the number of FTEs is not available at this level.

** All financial figures in millions of dollars

Environmental Health and Research Programs

Description: These programs are designed to reduce the risk of exposure to environmental health hazards by improving the capacity of communities to implement measures to manage, contain and control them. They also create and maintain healthy and safe community environments through: the investigation of potential environmental health-related outbreaks; raising awareness of environmental health hazards such as waterborne, foodborne and vector borne illnesses including health problems associated with poor indoor air quality, such as mould in housing. They provide for pest control and build community human resource capacity to adapt to environmental conditions, to maintain safe environments and to deal safely with environmental hazards. These programs include: First Nations Water Management Strategy; West Nile Virus; Contaminated Sites; Transportation of Dangerous Goods; Food Safety, Facilities Health Inspections; housing; and research.

Expected Results	Performance Indicators
Improved environmental health risk management	<ul style="list-style-type: none"> ◆ Number of communities with environmental health officers/trained community-based water quality monitors ◆ Number of communities equipped with water testing/sampling kits

2006-2007*		2007-2008*		2008-2009*	
\$	Salary \$	\$	Salary \$	\$	Salary \$
46.1	11.9	46.7	11.9	22.2	9.1

* Based on the PAA with adjustments for approved Treasury Board submissions. It was assumed that no growth would be applied to new funding and non-envelope funding. It was also assumed that 3% growth would be applicable to envelope funding. Only salary dollars was provided because the information on the number of FTEs is not available at this level.

** All financial figures in millions of dollars

Communicable Disease Control Programs

Description: These programs support public health needs and priorities in the design, implementation, management and delivery of programs to protect First Nations and Inuit communities from communicable diseases, and to implement measures to manage, contain and control risks of outbreak. These programs include: Tuberculosis; Immunization; HIV/AIDS; and Communicable Disease Emergencies.

Expected Results	Performance Indicators
Improved access to communicable disease prevention and control programs for First Nations and Inuit individuals, families, and communities	<ul style="list-style-type: none"> ◆ Number and percentage of communities with programs

2006-2007*		2007-2008*		2008-2009*	
\$	Salary \$	\$	Salary \$	\$	Salary \$
26.0	6.1	26.8	6.4	28.0	6.4

* Based on the PAA with adjustments for approved Treasury Board submissions. It was assumed that no growth would be applied to new funding and non-envelope funding. It was also assumed that 3% growth would be applicable to envelope funding. Only salary dollars was provided because the information on the number of FTEs is not available at this level.

** All financial figures in millions of dollars

Primary Health Care Programs

Description: Comprehensive health care services are provided to remote and/or isolated First Nations and Inuit settlements to supplement and support primary care services provided by provincial, territorial and/or regional health authorities. These include emergency and acute care health services. Health Canada ensures links to appropriate care by other health care providers and/or institutions as required by the client condition. The continuum of community health care and primary care services includes illness and injury prevention and health promotion activities. This includes the Home and Community Care Program and the Oral Health Strategy, for example.

Expected Results

Improved access to primary health care programs and services for First Nations and Inuit individuals, families and communities

Performance Indicators

- ◆ Number and percentage of communities with programs
- ◆ Number of treatment centres by type, in the communities
- ◆ Eligible client utilization rates of NIHB – Dental Benefits

2006-2007*		2007-2008*		2008-2009*	
\$	Salary \$	\$	Salary \$	\$	Salary \$
232.9	66.7	233.7	66.4	237.8	65.7

* Based on the PAA with adjustments for approved Treasury Board submissions. It was assumed that no growth would be applied to new funding and non-envelope funding. It was also assumed that 3% growth would be applicable to envelope funding. Only salary dollars was provided because the information on the number of FTEs is not available at this level.

** All financial figures in millions of dollars

Web Links

Other programs and services that contribute to this program activity total \$1,539.9 million; for further information on those programs and services please see the following web links.

Aboriginal Head Start On Reserve

www.hc-sc.gc.ca/fnih-spni/famil/develop/ahsor-papa_intro_e.html

Fetal Alcohol Syndrome and Fetal Alcohol Effects

www.hc-sc.gc.ca/fnih-spni/famil/preg-gros/intro_e.html

Aboriginal Diabetes Initiative

www.hc-sc.gc.ca/fnih-spni/diseases-maladies/diabete/index_e.html

Injury Prevention

www.hc-sc.gc.ca/fnih-spni/promotion/injury-bless/index_e.html

Indian Residential Schools

www.hc-sc.gc.ca/fnih-spni/services/indiresident/index_e.html

National Native Alcohol and Drug Addictions Program

www.hc-sc.gc.ca/fnih-spni/substan/ads/nnadap-pnlaada_e.html

Tobacco Control Strategy

www.hc-sc.gc.ca/fnih-spni/substan/tobac-tabac/index_e.html

NIHB

www.hc-sc.gc.ca/ahc-asc/branch-dirgen/fnihb-dgspni/nihbd-dssna/index_e.html

Communicable Disease Control

www.hc-sc.gc.ca/ahc-asc/branch-dirgen/fnihb-dgspni/phcphd-dsspsp/cdcd-dcmt/index_e.html

Children's Oral Health Initiative

[www.hc-sc.gc.ca/ahc-asc/activit/strateg/
fnih-spni/cohi-isbde_e.html](http://www.hc-sc.gc.ca/ahc-asc/activit/strateg/fnih-spni/cohi-isbde_e.html)

Environmental Health

[www.hc-sc.gc.ca/ahc-asc/branch-dirgen/
fnihb-dgspni/phcphd-dsspsp/ehd-dse/index_e.html](http://www.hc-sc.gc.ca/ahc-asc/branch-dirgen/fnihb-dgspni/phcphd-dsspsp/ehd-dse/index_e.html)

Drinking Water Quality

[www.hc-sc.gc.ca/fnih-spni/promotion/
water-eau/index_e.html](http://www.hc-sc.gc.ca/fnih-spni/promotion/water-eau/index_e.html)

Home and Community Care

[www.hc-sc.gc.ca/fnih-spni/services/
home-domicile/index_e.html](http://www.hc-sc.gc.ca/fnih-spni/services/home-domicile/index_e.html)

E-Health

[www.hc-sc.gc.ca/fnih-spni/services/
ehealth-esante/index_e.html](http://www.hc-sc.gc.ca/fnih-spni/services/ehealth-esante/index_e.html)

Aboriginal Health Human Resource Initiative

[www.hc-sc.gc.ca/ahc-asc/activit/strateg/
fnih-spni/ahhri-irrhs_e.html](http://www.hc-sc.gc.ca/ahc-asc/activit/strateg/fnih-spni/ahhri-irrhs_e.html)

Supplementary
Information

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Table 1: Departmental Planned Spending and Full Time Equivalents

(\$ millions)	Forecast Spending 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Health Policy, Planning and Information	448.4	288.6	218.2	214.9
Health Products and Food	262.4	303.2	298.4	283.1
Healthy Environments and Consumer Safety	287.8	306.1	301.7	301.3
Pest Control Product Regulation	58.3	58.7	58.2	54.1
First Nations and Inuit Health	1,867.7	2,087.9	2,126.9	2,138.8
Budgetary Main Estimates (gross)	2,924.6	3,044.5	3,003.4	2,992.2
Less: Respendable Revenues	68.9	69.1	69.4	69.7
Total Main Estimates	2,855.7	2,975.4	2,934.0	2,922.5
Adjustments: ⁽¹⁾				
Governor General Special Warrants:				
Operating Budget Carry Forward (horizontal item)	14.1			
Additional funding in support of Aboriginal health further to the Special Meeting of First Ministers and Aboriginal Leaders on September 13, 2004	25.5			
Additional funding to territories for medical travel costs and health systems reform (TB vote 5)	30.0			
Additional funding for initiatives related to the 10-Year Plan to Strengthen Health Care, such as wait times reduction, internationally educated health care professionals, and improved reporting to Canadians on the progress made in strengthening health care (\$15.0 million from TB Vote 5)	25.7			
Funding to ensure the safety of therapeutic products, including enhanced clinical trials oversight, monitoring of drugs and medical devices in the marketplace, and the implementation of new regulations for blood transfusion and organ transplantation (horizontal item)	2.6			
Funding to enhance early learning and childcare programs for First Nations on reserve (horizontal item)	6.1			
Additional funding for health risk assessments and protection measures related to the <i>Canadian Environmental Protection Act</i>	1.7			
Activities to mitigate the impact of the Bovine Spongiform Encephalopathy (BSE) crisis (horizontal item)	1.1			
Funding to deliver federal programs and services, including health in two Labrador Innu communities (Labrador Innu Comprehensive Healing Strategy) (horizontal item)	3.9			
Funding to continue the Government's plan to establish core genomics research and development capacity (horizontal item)	0.2			
Additional funding for the Access to Medicines Program which provides affordable access to Canadian patented pharmaceuticals for the treatment of HIV/AIDS, malaria, tuberculosis and other epidemics, in the least developed and developing countries	0.7			
Funding related to the assessment, management and remediation of federal contaminated sites (horizontal item)	0.6			
Funding to strengthen initiatives in support of the Canadian Strategy on HIV/AIDS in Canada (horizontal item) (\$0.8 million from TB Vote 5)	1.2			
Funding to improve the capacity to detect and the readiness to respond to a potential pandemic influenza outbreak including emergency preparedness, antiviral stockpiling and rapid vaccine development technology (horizontal item)	0.4			
Funding for the environmental clean-up of the Sydney Tar Ponds and Coke Oven Sites in the Muggah Creek Watershed (horizontal item)	0.1			
Funding to launch an integrated public health strategy to reduce the impact of chronic disease by promoting healthy living including specific initiatives to combat diabetes, cancer and cardiovascular disease (horizontal item)	0.2			
Funding to undertake projects related to the development and application of biotechnology (Canadian Biotechnology Strategy) (horizontal item)	0.2			

Table 1: Departmental Planned Spending and Full Time Equivalents (cont'd)

(\$ millions)	Forecast Spending 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Funding for the development of and reporting on environmental indicators related to clean air, clean water and greenhouse gas emissions (horizontal item)	0.2			
Funding for the delivery of federal programs and services, including health, to the O-Pipon-Na-Piwin Cree Nation (horizontal item)	0.1	1.5	1.6	0.4
Less: Spending authorities available	-61.0			
Other adjustments:				
Collective Agreements	41.4			
Joint Career Transition Committee (TB Vote 10)	0.1			
Adjustment – Statutory Items	0.4			
EBP Adjustment	7.9			
Funding for the Genomics Research and Development Initiative, under the auspices of the Canadian Biotechnology Strategy				4.0
Funding to Recognize a Landless Band and for the Registration of Newfoundland Indians		7.3	7.5	7.8
Funding for the Winter Olympics				0.6
One year extension of funding authority for First Nations and Inuit Non-Insured Health Benefits Program Review		30.0		
Funding for the Settlement Agreement for Indian Residential Schools			2.0	11.0
Funding for Avian and Pandemic Influenza Preparedness, with a Focus on Animal and Human Health		1.5	4.0	4.0
Government Wide Efficiencies – Procurement Savings		-4.6		
Year End Lapse ⁽²⁾	-66.9			
Total Adjustments	36.3	35.7	15.1	27.8
Total Planned Spending ⁽³⁾	2,892.0	3,011.1	2,949.1	2,950.3
Less: Non-respendable Revenue	8.9	8.9	8.9	8.9
Plus: Cost of services received without charge ⁽⁴⁾	85.6	84.7	84.6	84.6
Total Departmental Spending	2,968.7	3,086.9	3,024.8	3,026.0
Full-Time Equivalents ⁽⁵⁾	8,544.0	8,711.0	8,773.0	8,671.0

(1) Adjustments reflect Governor General Special Warrants and TB Vote 5 Access for 2005-2006.

(2) Year-end Lapse as per the 2005-2006 Public Accounts.

(3) Refer to Section 2 for an explanation by program activity of year-over-year fluctuations.

(4) Includes the following services received without charge: accommodation charges (Public Works and Government Services Canada); contributions covering employers' share of employees' insurance premiums and expenditures (Treasury Board Secretariat); Workers' Compensation (Human Resources and Skills Development Canada); and Legal Services (Department of Justice Canada).

(5) Full-time equivalents reflect the human resources that the Department uses to deliver its programs and services. This number is based on a calculation that considers full-time, term, casual employment, and other factors such as job sharing.

Table 2: Program Activities for 2006-2007 (in millions of dollars)

Program Activity	Operating	Capital	Grants	Contributions	Gross	Responsible Revenue	Total Main Estimates	Adjustments (planned spending not in Main Estimates)	Total Planned Spending
Health Policy, Planning and Information	95.6		57.1	135.9	288.6		288.6	-0.2	288.4
Health Products and Food	291.9	1.4	5.9	4.0	303.2	-41.2	262.0	0.1	262.1
Healthy Environments and Consumer Safety	260.4	1.0	5.1	39.6	306.1	-15.4	290.7	-0.8	289.9
Pest Control Product Regulation	58.7				58.7	-7.0	51.7	-0.1	51.6
First Nations and Inuit Health	1,144.7	1.5	30.0	911.7	2,087.9	-5.5	2,082.4	36.7	2,119.1
Total	1,851.3	3.9	98.1	1,091.2	3,044.5	-69.1	2,975.4	35.7	3,011.1

Table 3: Voted and Statutory Items listed in Main Estimates (in millions of dollars)

2006-2007			
Vote or Statutory Item	Truncated Vote or Statutory Wording	Current Main Estimates	Previous Main Estimates
1	Operating expenditures	1,674.4	1,552.6
5	Grants and contributions	1,189.4	1,201.8
(S)	Minister of Health- Salary and motor car allowance	0.1	0.1
(S)	Contributions to employee benefit plans	111.5	101.2
	Total Department	2,975.4	2,855.7

The difference between the current and previous year is due to various increases and decreases to the reference levels, of which some of the major increases are related to: the Special Meeting of the First Ministers and Aboriginal Leaders, the Strengthening the Safety of Drug Strategy, the *Canadian Environmental Protection Act*, and the yearly growth of the Indian Envelope.

The major increases are partially offset by the major decrease in the level of funding for the Primary Health Care Transition Fund.

Table 4: Services Received Without Charge

(\$ millions)	2006-2007
Accommodation provided by Public Works and Government Services Canada (PWGSC)	36.6
Contributions covering employers' share of employees' insurance premiums and expenditures paid by Treasury Board of Canada Secretariat Employers' contribution to employees' insured benefits plans and expenditures paid by TBS	44.1
Worker's compensation coverage provided by Human Resources and Skills Development Canada	0.8
Salary and associated expenditures of legal services provided by the Department of Justice Canada	3.2
2006-2007 Services received without charge	84.7

Table 5: Sources of Responsible and Non-Responsible Revenues

RESPONSIBLE REVENUES (millions of dollars)				
Program Activity	Forecast Revenue 2005-2006	Planned Revenue 2006-2007	Planned Revenue 2007-2008	Planned Revenue 2008-2009
Health Products and Food	37.7	41.2	41.2	41.2
Healthy Environments and Consumer Safety	12.0	15.4	15.7	16.0
Pest Control Product Regulation	5.9	7.0	7.0	7.0
First Nations and Inuit Health	3.4	5.5	5.5	5.5
Total Responsible Revenues	59.0	69.1	69.4	69.7
NON-RESPONSIBLE REVENUES (millions of dollars)				
Program Activity	Forecast Revenue 2005-2006	Planned Revenue 2006-2007	Planned Revenue 2007-2008	Planned Revenue 2008-2009
Health Products and Food	3.9	3.9	3.9	3.9
Healthy Environments and Consumer Safety	1.7	1.7	1.7	1.7
Pest Control Product Regulation	1.0	1.0	1.0	1.0
First Nations and Inuit Health	2.3	2.3	2.3	2.3
Total Non-Responsible Revenues	8.9	8.9	8.9	8.9
Total Responsible and Non-Responsible Revenues	67.9	78.0	78.3	78.6

Table 6: Resource Requirements by Branch and by Program Activity (in millions of dollars)

2006-2007

(\$ millions)	Health Policy, Planning and Information	Health Products and Food	Healthy Environments and Consumer Safety	Pest Control Product Regulation	First Nations and Inuit Health	Total Planned Spending
Health Policy Branch	269.6					269.6
Health Products and Food Branch		204.4				204.4
Healthy Environments and Consumer Safety Branch			237.5			237.5
Pest Management Regulatory Agency				40.1		40.1
First Nations and Inuit Health Branch					1,997.9	1,997.9
Chief Financial Officer Branch	3.2	9.2	8.6	2.0	16.7	39.7
Corporate Services Branch	7.9	24.3	21.9	4.8	41.3	100.2
Departmental Executive Branch*	7.7	24.2	21.9	4.7	63.2	121.7
Total	288.4	262.1	289.9	51.6	2,119.1	3,011.1

Note:

* Includes such areas as Communications, Legal Services, Office of the Chief Scientist, Audit and Accountability Bureau, Executive Offices and Offices of Regional Directors General.

Table 7: Major Regulatory Initiatives

PART A – NEW INITIATIVES	
PROGRAM ACTIVITY: HEALTH POLICY, PLANNING AND INFORMATION	
Regulations	Expected Results
Regulations under the <i>Assisted Human Reproduction Act</i>	New regulations will protect the health and safety of Canadians who use assisted human reproduction (AHR) procedures and ensure that AHR-related research, which may help find treatments for infertility and diseases, takes place in a controlled environment. Regulated activities include embryo research, clinical and laboratory practices and pre-implantation genetic diagnosis. The regulatory framework will also include a licensing framework for AHR activities, and provisions governing the reimbursement of expenditures, counselling, and the reporting of health information.
PROGRAM ACTIVITY: HEALTH PRODUCTS AND FOOD	
Regulations	Expected Results
<i>Food and Drug Regulations</i> (Amendments to Division 3 respecting Positron Emitting Radiopharmaceuticals)	Amendment to Part C, Division 3 of the <i>Food and Drug Regulations</i> to provide for an exemption for the requirement to file Clinical Trial applications for certain radiopharmaceutical studies. The amended regulations will eliminate regulatory burden for certain limited basic research studies, while helping to ensure that patient safety is not compromised.
<i>Food and Drug Regulations</i> (Introduction of Emergency Use New Drug Regulations in Division 8)	Division 8 of the <i>Food and Drug Regulations</i> requires manufacturers of new drugs intended for sale in Canada to provide substantial evidence of clinical effectiveness in humans. This initiative will provide Health Canada with a formal mechanism to approve products which only contain substantial evidence of clinical effectiveness in animal or in-vitro studies for use in emergency situations and meet emergency preparedness measures, such as the approval and distribution of a vaccine for the treatment and prevention of a pandemic influenza virus.
<i>Food and Drug Regulations</i> (Prohibition of Importation for Personal Use)	Increase the scope of the prohibition on importation of veterinary drugs to include the personal importation of drugs intended to be used in food-producing animals to avoid potentially harmful residues in food products from animals treated with these drugs.
<i>Food and Drug Regulations</i> (Carbadox)	Prohibition of sale of products containing carbadox for sale in Canada to avoid potentially harmful residues in food products from animals treated with this drug.
<i>Medical Device Regulations</i> (Introduce additional requirements for investigational testing for medical devices)	Further address risks to health associated with investigational testing by requiring conformity to Good Clinical Practices, reporting to Health Canada for reviewing/monitoring, and introducing an inspection program.
<i>Medical Device Regulations</i> (Amendment to regulate the reprocessing of single-use devices)	The amended regulations will mitigate the risks associated with the reprocessing of single-use devices by requiring reprocessors of single-use devices to operate under a standards-based licencing program administered by Health Canada.
<i>Food and Drug Regulations</i> (Regulations amending Divisions 1 and 8, Progressive Licensing Project)	A new regulatory framework that is based on sound science and risk management is being developed, including revised requirements for initial licensing of new products, provisions allowing for conditions of licensing (e.g., post-market commitments), regulations for the content and revisions of product monographs, provisions for continual evaluation and re-evaluation of licenses, new enforcement and compliance tools, regulations for the issuance of risk communication tools, and provisions for public involvement in the regulatory process.

Table 7: Major Regulatory Initiatives (cont'd)

PROGRAM ACTIVITY: PEST CONTROL PRODUCT REGULATION	
Regulations	Expected Results
<i>Pest Control Products Act</i> (<i>Sales Information Reporting Regulations</i>)	New regulations will specify how pest control product sales information will be collected by specifying the requirements for recording, retaining and reporting sales of pest control products.
PART B – ONGOING INITIATIVES	
PROGRAM ACTIVITY: HEALTH PRODUCTS AND FOOD	
Regulations	Expected Results
<i>Food and Drugs Act</i> (New regulatory framework for cells, tissues and organs intended for use in transplantation)	The new regulations will aim to balance the need for safe cells, tissues, and organs of high quality with the need to ensure the availability of cells, tissues and organs for transplantation. Phase I regulations will focus on the basic safety requirements for human cells, tissues and organs. Phase II regulations will include adverse event reporting requirements and a compliance and enforcement strategy.
<i>Food and Drugs Act</i> (New Regulations Respecting Blood and Blood Components)	The new regulations will aim to balance the need for safe blood and blood components with the need to ensure their availability for transfusion. They will include basic safety requirements, adverse event reporting requirements and a compliance and enforcement strategy.
<i>Food and Drug Regulations</i> (Amendment to provisions respecting plasmapheresis in Division 4 of Part C)	The amended regulations will reflect current methods and practices used to collect human plasma as well as the list of transmissible diseases for which tests must be performed in order to maximize the safety of plasma and plasma donors.
<i>Food and Drugs Act</i> (Amendment to the Processing and Distribution of Semen for Assisted Conception Regulations)	The amended regulations will reflect current safety standards for semen used in assisted conception.
<i>Food and Drug Regulations</i> (Addition of Vitamins and Minerals to Foods)	Facilitation of greater consumer choice and industry innovation by revision of regulations on the addition of vitamins and mineral nutrients to foods taking into account the role of nutrient addition to foods, consumer needs and expectations, and industry requests.
<i>Food and Drug Regulations</i> (Enhanced Labelling)	Enhanced protection of allergic consumers through mandatory labelling of specific food allergens, gluten sources and sulphites when present at 10 parts per million or more on the labels of prepackaged food products, whether they have been added directly or indirectly.
<i>Food and Drug Regulations</i> (Mandatory Labelling of Raw Ground Meat and Ground Poultry)	Reduction of foodborne illness as a result of providing safe handling information on the labels of these products which, due to their raw state, can introduce disease-causing bacteria to the food preparation environment.
<i>Food and Drug Regulations</i> (Health Claims)	Addition of two diet-related health claims to the list of claims manufacturers can use to promote healthy foods (e.g., fruits, vegetables and whole grains and reduced risk of heart disease, folic acid and reduced risk of neural tube defects).
<i>Food and Drug Regulations</i> (Saccharin)	Availability of an additional intense sweetener to allow a wider range of low sugar or sugar free food products for the benefit of consumers who wish to consume these products.
<i>Food and Drug Regulations</i> (Caffeine)	Additional label information on levels of caffeine in prepackaged beverages, including caffeine containing energy drinks, to allow consumers to make an informed choice about their caffeine intake.

Table 7: Major Regulatory Initiatives (cont'd)

Regulations	Expected Results
<i>Food and Drug Regulations</i> (Labelling of Unpasteurized Juice)	Reduction of foodborne illness related to the consumption of prepackaged unpasteurized juice products by providing additional information on the labels of these products.
<i>Food and Drug Regulations</i> (Revisions to Division 12 – Prepackaged Water and Ice)	Modernization and expansion of the safety and labelling requirements for prepackaged water and ice products.
<i>Food and Drug Regulations</i> (Regulations amending the Special Access Program)	The current Special Access Program allows for the use of unauthorized drugs prescribed to patients on an individual basis. The amendment will allow for the block release of unauthorized drugs to a population and/or for stockpiling to address public health emergencies.
<i>Food and Drug Regulations</i> (Regulations amending the data protection provisions)	The data protection provisions are being amended to provide effective data protection for a period of eight years for innovator drugs that contain medicinal ingredients not previously approved for sale in Canada. Submissions including pediatric studies that were designed and conducted with the purpose of increasing knowledge about the drug in pediatric age groups will be protected for an additional six months.

PROGRAM ACTIVITY: HEALTHY ENVIRONMENTS AND CONSUMER SAFETY

Regulations	Expected Results
<i>Controlled Drugs and Substances Act</i> (Regulations to expand the authority for regulated health professionals to prescribe controlled substances where appropriate)	Federal legislation will not unnecessarily restrict the professional practice of any health profession regulated by provincial or territorial (P/T) authorities, including practitioners of medicine, dentistry, veterinary medicine, podiatric medicine, midwifery, and nurse practitioners, with respect to the use of controlled substances in the treatment of their patients. This result will be achieved over the next 2 to 3 years as federal and P/T regulations are amended to allow health professionals to prescribe controlled substances in accordance with the standards of professional practice defined by their regulatory authorities. Achievement will be measured by improved alignment of federal and P/T regulatory frameworks governing the appropriate use of controlled substances for medical purposes.
<i>Tobacco Advertising Regulations</i>	Increased awareness of tobacco-related health hazards through mandating of new health warnings in advertising. Awareness will be measured through surveys.
<i>Tobacco Act</i> (Amendment to the <i>Tobacco Labelling Regulations</i>)	Increased awareness of tobacco-related hazards through the introduction of new health warnings on packaging. Awareness will be measured through surveys.
<i>Tobacco Regulations</i> (Amendments regarding “Light” and “Mild” Descriptors)	Reduced confusion among smokers regarding these descriptors. Greater awareness that no class of cigarettes is a “safer” alternative. Achievements will be measured through surveys.
<i>Tobacco Retail Promotion Regulations</i>	Reduced visibility of tobacco promotion at retail. Achievements will be measured through surveys at retail

PROGRAM ACTIVITY: PEST CONTROL PRODUCT REGULATION

Regulations	Expected Results
<i>Pest Control Products Regulations</i>	Revised regulations will include changes to clarify and modernize the <i>Pest Control Product Regulations</i> (PCPR) to make the PCPR coherent with the new <i>Pest Control Products Act</i> , and to formalize current procedures and practices for better compliance.

Table 7: Major Regulatory Initiatives (cont'd)

Regulations	Expected Results
<i>Pest Control Products Act</i> (Amendments to the <i>Agriculture and Agri-Food Administrative Monetary Penalties Regulations</i>)	Revised regulations will address violations under the new <i>Pest Control Products Act</i> and regulations.
<i>Pest Control Products Act</i> (New regulations on review panels)	The new <i>Pest Control Product Act</i> includes a process for the reconsideration of major registration decisions by a review panel. New regulations will specify the parameters for establishing review panels and for the selection and remuneration of panel members. This will contribute to better public participation in the regulatory process, increased transparency and increased public and stakeholder confidence in pesticide regulation.
<i>Pest Control Products Act</i> (New regulations on the reporting of adverse effects from the use of pest control products)	New regulations will specify the prescribed information and time frames for reporting adverse effects of pest control products. This will contribute to strengthened health and environmental protection.

Table 8: Details on Transfer Payments Programs

Over the next three years, Health Canada will manage the following transfer payment programs in excess of \$5 million:

2006-2007

- ♦ Organization for the Advancement of Aboriginal People's Health (OAAPH)
- ♦ Payments to Indian bands, associations or groups for the control and provision of health services
- ♦ First Nations and Inuit Health Governance and Infrastructure Support (HG/IS)
- ♦ First Nations and Inuit Community Programs
- ♦ First Nations and Inuit Health Facilities and Capital Program
- ♦ First Nations and Inuit Health Benefits
- ♦ First Nations and Inuit Health Protection
- ♦ First Nations and Inuit Primary Health Care
- ♦ Bigstone Non-Insured Health Benefits Pilot Project
- ♦ Grant for Nunavut Medical Travel Fund
- ♦ Named Grant to the Health Council of Canada
- ♦ Grant to the Canadian Patient Safety Institute (CPSI)
- ♦ Grant to the Canadian Coordinating Office for Health Technology Assessment (CCOHTA)
- ♦ Contributions for the Primary Health Care Transition Fund (PHCTF)
- ♦ Health Care Strategies and Policy Contribution Program
- ♦ Contributions Program to Improve Access to Health Services for Official Language Minority Communities
- ♦ Grant to the Canadian Blood Services
- ♦ Contributions in support of the Federal Tobacco Control Strategy (FTCS)
- ♦ Alcohol and Drug Treatment and Rehabilitation Contribution Program
- ♦ Drug Strategy Community Initiatives Fund

2007-2008

- ♦ Organization for the Advancement of Aboriginal People's Health (OAAPH)
- ♦ Payments to Indian bands, associations or groups for the control and provision of health services
- ♦ First Nations and Inuit Health Governance and Infrastructure Support (HG/IS)
- ♦ First Nations and Inuit Community Programs
- ♦ First Nations and Inuit Health Facilities and Capital Program
- ♦ First Nations and Inuit Health Benefits
- ♦ First Nations and Inuit Health Protection
- ♦ First Nations and Inuit Primary Health Care
- ♦ Bigstone Non-Insured Health Benefits Pilot Project
- ♦ Grant for Nunavut Medical Travel Fund
- ♦ Named Grant to the Health Council of Canada
- ♦ Grant to the Canadian Patient Safety Institute (CPSI)
- ♦ Grant to the Canadian Coordinating Office for Health Technology Assessment (CCOHTA)
- ♦ Health Care Strategies and Policy Contribution Program
- ♦ Contributions Program to Improve Access to Health Services for Official Language Minority Communities
- ♦ Grant to the Canadian Blood Services
- ♦ Contributions in support of the Federal Tobacco Control Strategy (FTCS)
- ♦ Alcohol and Drug Treatment and Rehabilitation Contribution Program
- ♦ Drug Strategy Community Initiatives Fund

Table 8: Details on Transfer Payments Programs (cont'd)

2008-2009

- ◆ Organization for the Advancement of Aboriginal People's Health (OAAPH)
- ◆ Payments to Indian bands, associations or groups for the control and provision of health services
- ◆ First Nations and Inuit Health Governance and Infrastructure Support (HG/IS)
- ◆ First Nations and Inuit Community Programs
- ◆ First Nations and Inuit Health Facilities and Capital Program
- ◆ First Nations and Inuit Health Benefits
- ◆ First Nations and Inuit Health Protection
- ◆ First Nations and Inuit Primary Health Care
- ◆ Bigstone Non-Insured Health Benefits Pilot Project
- ◆ Grant for Nunavut Medical Travel Fund
- ◆ Named Grant to the Health Council of Canada
- ◆ Grant to the Canadian Patient Safety Institute (CPSI)
- ◆ Grant to the Canadian Coordinating Office for Health Technology Assessment (CCOHTA)
- ◆ Health Care Strategies and Policy Contribution Program
- ◆ Contributions Program to Improve Access to Health Services for Official Language Minority Communities
- ◆ Grant to the Canadian Blood Services
- ◆ Contributions in support of the Federal Tobacco Control Strategy (FTCS)
- ◆ Alcohol and Drug Treatment and Rehabilitation Contribution Program
- ◆ Drug Strategy Community Initiatives Fund

For further information on the above-mentioned transfer payments programs see www.tbs-sct.gc.ca/est-pre/estime.asp

Table 9: Conditional Grants (Foundations)

Over the next three years, Health Canada will contribute to the following foundations using conditional grants:

2006-07

1. Canada Health Infoway Inc. (*Infoway*)
2. Canadian Institute for Health Information
3. Canadian Health Services Research Foundation

2007-08

1. Canada Health Infoway Inc. (*Infoway*)
2. Canadian Institute for Health Information
3. Canadian Health Services Research Foundation

2008-09

1. Canada Health Infoway Inc. (*Infoway*)
2. Canadian Institute for Health Information
3. Canadian Health Services Research Foundation

For further information on the above-mentioned foundations see <http://www.tbs-sct.gc.ca/est-pre/estime.asp>

Table 10: Horizontal Initiatives

Over the next three years, Health Canada will be involved in the following horizontal initiatives as either the lead or as a partner:

2006-07

1. Canada's Drug Strategy (lead)
2. Building Public Confidence in Pesticide Regulation and Improving Access to Management Products (lead)
3. Federal Early Childhood Development (ECD) Strategy for First Nations and Other Aboriginal Children (lead)

Further information on the above-mentioned horizontal initiatives see <http://www.tbs-sct.gc.ca/est-pre/estime.asp>

Table 11: Sustainable Development Strategy

Health Canada's current Sustainable Development Strategy entitled *Becoming the Change We Wish to See* is a three year strategic plan that tells Canadians and Parliament what general and specific commitments Health Canada has made to sustainable development (SD). To build on the success of the previous strategy, the Department's third strategy continues with the themes identified in the previous one. These key themes are:

- ♦ Helping to create healthy social and physical environments.

- ♦ Integrating sustainable development into departmental decision-making and management processes.
- ♦ Minimizing the environmental and health effects of the Department's physical operations and activities.

Whereas the Department's first strategy contained over 100 commitments, this Strategy focuses on 20 commitments, highlights how employees are an integral part of the overall plan, and identifies a number of practical tools to help incorporate sustainable development at work and at home.

SUSTAINABLE DEVELOPMENT STRATEGY COMMITMENTS**1.1.1:**

In partnership with federal, provincial and territorial departments of health and environment, Health Canada will develop an integrated, source-to-tap approach to drinking water quality in Canada.

1.1.2:

Health Canada will work with other federal departments to develop a compliance framework for drinking water quality in areas of federal jurisdiction.

1.1.3:

Health Canada, in conjunction with other federal departments, will reduce cross-border air pollution by undertaking pilot projects that enable greater opportunities for coordinated air quality management between Canada and the United States.

1.1.4

Health Canada will collaborate with partners and other federal departments to assess climate change impacts on human health and well-being, and research and develop approaches to adaptation planning and implementation as part of the Climate Change Plan for Canada.

1.1.5:

Health Canada will work in consultation with stakeholders to develop and/or update science-based guidelines and standards to improve the safety of the food supply and reduce foodborne illness.

1.1.6:

Health Canada will help prevent the exploitation of flora and fauna used for medicinal purposes.

1.1.7:

Health Canada will improve its process for making regulatory decisions for pest control products, including providing access to safer products, and will provide information on pest control products and on sustainable pest management practices.

1.2.1:

Health Canada will work in collaboration with First Nations and Inuit and provinces and territories to better integrate health services for a sustainable, seamless system of health services for First Nations and Inuit.

Table 11: Sustainable Development Strategy (cont'd)

SUSTAINABLE DEVELOPMENT STRATEGY COMMITMENTS (cont'd)

2.1.1:

Health Canada will improve the integration of SD considerations within the Department by developing a framework to identify key planning, reporting activities and modern management practices that could incorporate SD considerations, and will integrate sustainable development into these areas where appropriate by March 31, 2007.

2.1.2:

Health Canada will improve the integration of SD considerations within the Department by effectively integrating SD into key departmental policies, legislation and contracts where appropriate, and establishing a formal process to evaluate this integration by March 31, 2007.

2.1.3:

Health Canada will increase employee awareness about sustainable development by developing and implementing a social marketing campaign for March 31, 2007.

2.1.4:

Health Canada will increase employee awareness about sustainable development by developing and implementing a departmental training curriculum on sustainable development to be provided to at least 1,000 Health Canada employees by March 31, 2007.

2.1.5:

Health Canada will contribute to increase federal employee awareness of sustainable development through partnering with other government departments, federal committees and networks to design and deliver an interdepartmental course about sustainable development by March 31, 2007.

3.1.2:

By March 2007, Health Canada commits to providing facility managers and other managers with authorities over facilities with training on the sustainable operation and management of Health Canada facilities. The training will be based on the departmental guidebook.

3.2.3:

By January 2007, Health Canada will begin implementing and reporting the recommendations outlined in the departmental pollution prevention guidebook and action plan.

Table 11: Sustainable Development Strategy (cont'd)

Since the first strategy, Health Canada has worked to create a culture that recognizes the importance of sustainable development in its operations. Approval of a Sustainable Development Policy in December 2000 enabled the integration of five key principles (shared responsibility, integrated approaches, equity, accountability, and continuous improvement) into the Department's third Sustainable Development Strategy. They will act as guiding principles for the development of the next strategy covering 2007 to 2010, to be tabled in Parliament in December 2006. The Department will continue to report annually on progress made on SD Strategy commitments.

Strategic Environmental Assessment (SEA) is a systematic and comprehensive process for evaluating the environmental effects of a policy, plan or program and its alternatives, at the earliest stage in planning. Health Canada has a requirement to complete SEAs in conformance with the *2004 Cabinet Directive on the Environmental Assessment of Policy, Plan and Program Proposals*. Health Canada has developed a policy and guidelines for strategic environmental assessment to support departmental efforts to ensure proposals with important positive or negative environmental effects are identified and enhancement or mitigation measures are identified. The Department is committed to providing training on this initiative to policy staff as required and will continue to consider the environmental impacts of our activities.

Additionally, use of an environmental management system, or EMS, is another way to promote sustainable development. Two of the priorities of the EMS Division are the review of the EMS to reflect the multiple changes within the federal government and the revamping of the EMS database (the primary resource for environmental information). Some preliminary work on the EMS database has already started and will continue in 2006-2007. Other databases in the Health Portfolio used to capture environmental information include a fleet database for tracking vehicle operations and a hazardous waste database for some hazardous streams.

Building on previous experiences and incorporating best practices in our work will help to achieve sustainable development in the long term.

Table 12: Internal Audits and Evaluations

Project Title	Estimated Completion Date ¹
Recently Completed Internal Audits	
Review of the Administration of the Health Canada Contract with First Canadian Health Management Corporation Inc.	Approved by the DA&EC on April 7, 2005
Follow-up of the Directed Audit of <i>Société Santé en Français Inc.</i>	Approved by the DA&EC on November 1, 2005
Upcoming Internal Audits	
Audit of the Handling of Controlled Drug Substances (CDS) in FNIHB Health Facilities within Two Selected Regions	Approved by the DA&EC April 2006
Audit of Primary Health Care Transition Fund (PHCTF) Contributions to the Ministry of Health and Long Term Care of the Province of Ontario	Fall 2006
Audit of Selected Administrative Areas	Summer 2006
Audit of Health Canada Initiatives for GOL	Approved by the DA&EC June 2006
Audit of IT Security in Health Canada	Fall 2006
Audit of the Implementation of Corrective Measures Ordered by the Public Service Commission	Fall 2006
Selected Results-Based Management Accountability Frameworks	January 2007
Audit of Mental Health and Addictions Programs	January 2007
Audit of the Drug Strategy and Controlled Substances Programme	January 2007
Recently Completed Evaluations	
Evaluation of the Memorandum of Understanding between the Assistant Deputy Ministers and Regional Directors General	Approved by the DA&EC November 2005
Evaluation of the Health Canada Innovation Fund	Approved by the DA&EC November 2005
Evaluation of the Canada Health Infostructure Partnership Program	Approved by the DA&EC November 2005
Impact Evaluation of the Health Transition Fund	Approved by the DA&EC November 2005
Formative Review of the Research Management and Dissemination Division	Approved by the DA&EC November 2005
Health Transfer Policy – FNIHB	Approved by the DA&EC April 2006
Brighter Futures and Building Healthy Communities Program – FNIHB	Approved by the DA&EC April 2006
Non-Insured Health Benefits Pilot Projects – FNIHB	Approved by the DA&EC April 2006
Primary Health Care Transition Fund – interim evaluation – Health Policy Branch (HPB)	Approved by the DA&EC April 2006
Cost Recovery in the Pest Management Regulatory Agency	Approved by the DA&EC April 2006
Health Care Strategies and Policy Grant and Contribution programs – Performance Measurement System Review – HPB	Approved by the DA&EC June 2006

¹ The 'Estimated Completion Date' is the date the internal audit or evaluation report is expected to be tabled for approval by Health Canada's Departmental Audit and Evaluation Committee (DA&EC).

Table 12: Internal Audits and Evaluations (cont'd)

Project Title	Estimated Completion Date ¹
Upcoming Evaluations	
Review of Evaluation and Performance Measurement at Health Canada – CFOB	Fall 2006
First Nations and Inuit Home and Community Care Program – FNIHB	Fall 2006
Canada Prenatal Nutrition Program – FNIHB	Fall 2006
Aboriginal Diabetes Initiative – FNIHB	Winter 2006-2007
Augmenting Health Canada's Response to Bovine Spongiform Encephalopathy (BSE) – BSE I phase II of Health Canada's and the PHAC's response to BSE in the areas of Risk Assessment and Targeted Research – BSE II	Fall 2006
Federal Drinking Water Compliance Program (HECS)	Winter 2006-2007
Federal Tobacco Control Strategy	March 2007
Contribution Program for Improving Access to Health Services for Official Languages Minority Communities – HPB	Winter 2006-2007
Canadian Regulatory System for Biotechnology – HPFB	Fall 2006
Therapeutics Access Strategy – HPFB	Fall 2006
Natural Health Products Research Program – HPFB	Fall 2006
Drug Strategy and Controlled Substances Program, Canada's Drug Strategy Renewed Year 2 – HECSB	Fall 2006
Canadian Environmental Protection Act – HECSB	Fall 2006
Building Public Confidence in Pesticide Regulation and Improving Access to Pest Management Products – PMRA	Fall 2006
Expenditure Review Reductions and the Impact on Health Canada – DAEC/DPMED	Winter 2006-2007
Contracting for Professional and Special Services in Health Canada – DAEC/DPMED	Winter 2006-2007

¹ The 'Estimated Completion Date' is the date the internal audit or evaluation report is expected to be tabled for approval by Health Canada's Departmental Audit and Evaluation Committee (DA&EC).

Other Items
of Interest

4

HEALTH CANADA'S REGIONAL OPERATIONS

An Overview

On January 6, 2006, the Deputy Minister of Health and the Associate Deputy Minister of Health announced the establishment of the Public Affairs, Consultation and Regions Branch. This new Branch incorporates the Communications, Marketing and Consultation Directorate; the external and internal ombudsman services; and the regions. The Branch affords Health Canada an opportunity to better integrate national and regional perspectives in all policies and strategies, communications and consultation functions, and is key to a commitment of transparency on the part of the Department.

Over the course of the last year, an initiative has been underway that aims to improve service to Canadians by strengthening the Department's programs and regional role, and enhancing communication and collaboration. As such, the role of the Regional Directors General has been enhanced in order to fully realize their integral role as Health Canada's senior representatives in the regions, responsible for the management of all of Health Canada's regional operations and personnel. The creation of the new Branch complements this ongoing work and will enable the Department to continue to evolve in the context of a changing environment. It also fulfills Health Canada's continuing commitment to ensure both greater coherence and a consistent presence for the Department nationally and in each region across the country.

In recognition of the unique program and service delivery challenges and opportunities among a diverse and often remote northern population, responsibility for all Health Canada activities in the Northwest Territories, Yukon and Nunavut is now overseen by the Northern Secretariat component of Regional Operations. This consolidation of responsibility for the North, under the Northern Secretariat, will provide a consistent Territorial lens for Health Canada's policy and program development, and greater coherence to Health Canada programs and services in northern communities. Further, in consideration of the needs

and priorities identified within the community and among stakeholders, the Manitoba and Saskatchewan Region has been re-organized so that Manitoba and Saskatchewan each now assume status as an individual region. This will serve to enhance communications and consultations within the Department and with Health Canada's numerous stakeholders, partners and the public.

Health Canada's presence across the country will continue to be reflected through program and service delivery tailored to meet the varied needs of each of the geographic regions it serves. This includes the British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Quebec and Atlantic regions, as well as the Northern Secretariat. Over one third of Health Canada's employees work in communities outside of the National Capital Region. This regional proximity to clients provides the Department with specialized knowledge and capacity to assist in furthering departmental goals and priorities. Health Canada's Regions offer local intelligence and a community connection which serves to bring regional perspective and coherence into the design and delivery of health protection and promotion programs as well as national policy development. Such citizen-centred engagement helps to ensure that program delivery in the regions is representative of and responsive to local issues and priorities, while respecting national program integrity and accountability.

The close ties between regional offices and their counterparts in other federal departments provide frequent opportunities for collaboration and partnership. Representation by Health Canada's Regions on regional Federal Councils serves to support the broader federal government agenda. In addition, it allows Health Canada to play a key role in reflecting regional views in the development of national cross-departmental policy and in the design of program delivery.

Health Canada's Regions foster and strengthen effective, long standing relationships and associations with provincial, territorial and municipal governments and key stakeholders. These relationships serve to advance horizontal collaboration and facilitate multi-partnered and inter-governmental initiatives. They also improve the Department's understanding of challenges and opportunities which cross program boundaries as provincial and territorial approaches to managing the health care agenda evolve.

Strategic and targeted use of the Health Canada Innovation Fund continues to provide Health Canada's Regions with the ability to create and leverage partnership opportunities in response to local issues and concerns. Whether in partnership with academic institutions, non-governmental community based organizations or health research foundations, Health Canada Innovation Fund initiatives seek to identify and answer the specific needs and priorities within local groups and communities.

Providing Support to Departmental Strategic Outcomes and Corporate Objectives

Strengthened knowledge base to address health priorities:

- ◆ Manage intergovernmental affairs; and
- ◆ Foster communication, consultation and stakeholder engagement within the Regions.

Safe and effective health products and food and information for healthy choices:

- ◆ Conduct surveillance, enforcement and compliance activities for health-related products;
- ◆ Assist in ensuring safe and effective health products and food and information for healthy choices through regional contributions to national policies, programs, and regulations; and
- ◆ Engage in consultation to build stakeholder relations and provide information for making healthy choices.

Reduced health and environmental risks from products and substances, and safer living and working environments:

- ◆ Conduct inspection and surveillance activities as well as health promotion activities related to consumer products, tobacco, controlled drugs and substances, and the environment;
- ◆ Establish marketplace and user inspection programs as well as compliance and promotional activities for pesticides;
- ◆ Conduct risk assessments and evaluations and provide health advice to federal employees, provinces and municipalities related to chemical contaminants and exposure levels, drinking water standards, and work environments.

Better health outcomes and reduction of health inequalities between Aboriginals and other Canadians:

- ◆ Direct provision of Non-Insured Health Benefits to First Nations and Inuit clients;
- ◆ Delivery of community-based health promotion and disease prevention programs for First Nations and Inuit populations;
- ◆ Delivery of Home and Community Care Program and addictions treatment services for First Nations and Inuit populations;
- ◆ Development and delivery of health protection programs and services for First Nations and Inuit populations;
- ◆ Capacity building in the areas of health information management and analysis for First Nations and Inuit populations;
- ◆ Provision of management capacity support and capital investments in First Nations and Inuit communities; and
- ◆ Collaborate in emergency preparedness and response and pandemic planning.

Corporate Management – Leadership and infrastructure to support the Department's Regional Operations:

- ♦ Ensure sound stewardship of both the human and financial resources of the Department through effective and accountable management and administration of assets, human resources, information technology, policy, planning, security and business continuity services.

Supporting Health Canada's Programs and Services

Health Canada requires efficient and effective corporate services to ensure that it has the capacity and capability to undertake its main activities of promoting, protecting and improving the health of Canadians. The following examples demonstrate the Department's ongoing efforts and commitment to strengthen its corporate services and management practices

Our human resources planning process responds to the human resources risks and challenges we encounter in support of our business objectives. As well as consolidating and realigning IT resources and positioning the Department to align with the Government of Canada common services initiatives and generate savings, *The Way Forward* information technology project will ensure that service levels are maintained for all clients and that our IT infrastructure is sustainable in support of Health Canada's programs.

Health Canada was an early adopter of the Government's Management Accountability Framework (MAF) and will continue its efforts to not only promote the MAF throughout the Department but to implement management improvement initiatives to strengthen stewardship and accountability including the Financial Management Control Framework, the Contract Management Framework, the Contract Requisitions and Reporting System, the Asset Management Framework and the Departmental Real Property Management Framework. We will use the results of our MAF Assessment and other management or government priorities to determine areas requiring further attention or action. In addition, the Department will continue to share information and, as required, coordinate efforts with other Portfolio members.

We have also recently begun a department-wide operational planning process and we will continue our efforts to enhance and improve this process. Not only does operational planning link expected results to the allocation of resources, it will assist in identifying key priority pressures within the Department as well as reviewing opportunities for reallocation of resources from lower to higher priorities.

We will continue to implement an Integrated Risk Management (IRM) Framework and to update the Department's Corporate Risk Profile and Internal Scan on a regular basis. As well, we will continue to systematically manage risk in key functional areas and decision-making processes through such tools as the risk-based audit plan, the risk communications framework, risk-based disposition of records, an information technology enterprise approach predicated on risk management and a risk-based approach to human resources classification and staffing. We will also complete the development of an internal Departmental Business Continuity Plan in the Event of a Pandemic Influenza Outbreak that will allow us to maintain operations to the extent possible while protecting the health and safety of employees.

Initiatives are also underway to review, improve and update privacy policies and practices to ensure that personal information is protected within Health Canada. For example, a Departmental Information Management Awareness campaign is reinforced by more in-depth courses on both access to information and privacy offered to employees throughout Health Canada. We also conduct Privacy Impact Assessments on an on-going basis to identify and address privacy risks related to Departmental programs or services that handle personal information.

We foster an ethical culture that best embodies the core values of Health Canada and the Public Service through our Centre for Workplace Ethics. The Centre collaborates as appropriate with the services of Internal Ombudsman and Informal Conflict Management System (ICMS) to assist staff or teams with specific and pressing ethical challenges or conflict related issues. Regular reporting on trends by these three services provides the Deputy Minister with a department-wide perspective on progress as well as an early identification mechanism for areas of concern.

protection des renseignements personnels dans tous les programmes et les services du Ministère qui utilisent de tels renseignements.

Nous favorisons une solide culture éthique qui intègre le mieux possible les principales valeurs de Santé Canada et de la fonction publique par l'intermédiaire de notre Centre d'éthique en milieu de travail. Ce dernier collabore, au besoin, avec les services internes d'ombudsman et du Système de gestion

informelle des conflits (SGIC) pour aider le personnel ou les équipes à résoudre des conflits ou à surmonter des défis particuliers et urgents sur le plan éthique. La reddition de comptes sur les tendances par ces trois services permet au sous-ministre d'avoir un aperçu des progrès accomplis à l'échelle du Ministère et d'avoir une idée rapidement des secteurs de préoccupation potentiels.

Santé Canada nécessite des services ministériels efficaces et efficaces pour être en mesure d'entreprendre ses principales activités relativement à la promotion, à la protection et à l'amélioration de la santé des Canadiens. Les exemples qui suivent illustrent les efforts et l'engagement continus du Ministère à l'égard du renforcement de ses services ministériels et de ses pratiques de gestion.

Notre processus de planification des ressources humaines nous permet de faire face aux risques et aux défis connexes que nous rencontrons dans nos efforts pour atteindre nos objectifs opérationnels. En plus de consolider et de réaligner les ressources de TI et de positionner le Ministère de façon à ce qu'il respecte les initiatives de services communs du gouvernement du Canada et réalise des économies, le projet de TI *Les prochaines étapes* assurera le maintien des niveaux de service pour tous les clients et la durabilité de l'infrastructure de TI pour appuyer l'exécution des programmes de Santé Canada.

Santé Canada, l'un des premiers ministères à adopter le Cadre de responsabilisation de gestion (CRG) du gouvernement, poursuivra ses efforts non seulement pour promouvoir le CRG à l'échelle du Ministère mais aussi pour mettre en œuvre des initiatives d'amélioration de la gestion afin de renforcer la gouvernance et la responsabilisation; parmi ces initiatives : le Cadre de contrôle de la gestion financière, le Cadre de gestion des marchés, le Système de demandes et de rapports relatifs aux contrats, le Cadre de gestion des biens et le Cadre de gestion des biens immobiliers du Ministère. Nous utiliserons les résultats de l'évaluation du CRG et d'autres priorités gouvernementales ou de gestion pour cerner les secteurs qui demandent une attention particulière ou des mesures d'intervention. De plus, le Ministère continuera à partager l'information et, au besoin, à coordonner les efforts avec les autres membres du Portefeuille.

Nous avons récemment entamé un processus de planification opérationnelle à l'échelle du Ministère et nous continuerons nos efforts pour l'améliorer. La planification opérationnelle établit non seulement des liens entre les résultats attendus et l'affectation des ressources, mais elle aide aussi à déterminer les principales pressions au sein du Ministère et à examiner les possibilités de réaffectation des ressources des priorités de moindre importance aux priorités plus élevées.

Nous continuerons à mettre en œuvre le Cadre de gestion intégrée du risque et à faire des mises à jour régulières du profil de risque de l'organisation et de l'analyse de l'environnement interne du Ministère. Nous gérerons toujours systématiquement les risques dans les principaux secteurs fonctionnels et les processus décisionnels grâce à des outils comme le plan de vérification en fonction du risque, le cadre de communication des risques, la disposition des dossiers en fonction du risque, une approche d'entreprise en matière de TI reposant sur la gestion du risque et une approche de classification et de dotation en ressources humaines axée sur le risque. Nous achèverons l'élaboration d'un plan de continuité des opérations du Ministère en cas de pandémie de grippe, qui nous permettra de poursuivre nos activités dans la mesure du possible tout en protégeant la santé et la sécurité des employés.

Des initiatives sont en cours pour examiner, améliorer et mettre à jour les politiques et les pratiques visant à assurer la protection des renseignements personnels à Santé Canada. Par exemple, nous organisons une campagne de sensibilisation à la gestion de l'information ministérielle en même temps que nous offrons des cours plus approfondis sur l'accès à l'information et la protection de la vie privée aux employés du Ministère. Nous procédons régulièrement à des évaluations des facteurs relatifs à la vie privée pour cerner et éliminer les risques en matière de

- ◆ Évaluer les risques et fournir aux fonctionnaires fédéraux, aux provinces et aux municipalités des conseils sur la santé par rapport aux contaminants chimiques et aux niveaux d'exposition, aux normes relatives à l'eau potable, et aux milieux de travail.
- ◆ Assurer la prestation directe de soins de santé non assurés aux clients des Premières nations et des Inuits.
- ◆ Exécuter des programmes de promotion de la santé communautaire et de prévention des maladies dans les communautés des Premières nations et des Inuits.
- ◆ Assurer des services de soins à domicile et en milieu communautaire, et des services de traitement des toxicomanies dans les communautés des Premières nations et des Inuits.
- ◆ Elaborer des programmes de protection de la santé et assurer la prestation de services connexes dans les communautés des Premières nations et des Inuits.

De meilleurs résultats de santé et réduction des inégalités en santé entre les Premières nations et Inuits et les autres Canadiens

- ◆ Renforcer les capacités dans les domaines de gestion et d'analyse de l'information sur la santé dans les communautés des Premières nations et des Inuits.
- ◆ Offrir un soutien aux ressources de gestion, et un investissement de capitaux dans les communautés des Premières nations et des Inuits.
- ◆ Collaborer aux mesures et aux interventions d'urgence, et à la planification en case de pandémie.
- ◆ Assurer une saine intendance des ressources humaines et financières du Ministère au moyen d'une gestion efficace et responsable des biens, des ressources humaines, de la technologie de l'information, des politiques, de la planification, de la sécurité et des services de continuité des opérations.

Gestion ministérielle – Leadership et infrastructure à l'appui des opérations du Ministère dans les régions.

- Offrir un appui dans le but d'atteindre les résultats stratégiques et les objectifs du Ministère**
- Amélioration des connaissances afin d'aborder les priorités de santé
- ◆ Gérer les affaires intergouvernementales.
 - ◆ Encourager la communication et la consultation ainsi que la participation des intervenants dans les régions.
- Produits de santé et des aliments sûrs et efficaces et des renseignements en vue de choix de santé sains**
- ◆ Mener des activités de surveillance, d'exécution et de conformité ayant trait aux produits liés à la santé.
 - ◆ Aider à assurer l'accès à des produits de santé et à des aliments sûrs et efficaces ainsi qu'à des renseignements permettant de faire des choix sains en veillant à ce que les régions contribuent aux politiques, aux programmes et aux règlements nationaux.
 - ◆ Participer à des consultations afin de renforcer les relations avec les intervenants, et offrir des renseignements en vue de faire des choix sains.
- Réduction des risques pour la santé et l'environnement de produits et de substances réglementés, et milieux de vie et de travail plus sains**
- ◆ Réaliser des inspections et des activités de surveillance et de promotion de la santé par rapport aux produits de consommation, au tabac, aux médicaments et aux substances contrôlées, et à l'environnement.
 - ◆ Établir des programmes d'inspection relatifs aux produits mis en marché et aux usagers, mener des activités de conformité et de promotion par rapport aux pesticides.

conseils fédéraux régionaux permet d'appuyer le vaste programme du gouvernement fédéral. En outre, elle permet à Santé Canada de jouer un rôle clé en ce qui concerne la prise en compte des points de vue régionaux dans l'élaboration des politiques interministérielles nationales et la conception de l'exécution des programmes.

Les bureaux régionaux de Santé Canada encouragent et renforcent les relations et les associations de longue date efficaces avec les gouvernements provinciaux et municipaux et les intervenants clés. Ces relations servent à faire avancer une collaboration horizontale et à faciliter les initiatives faisant intervenir de multiples partenaires et les initiatives intergouvernementales. Elles aident également le Ministère à mieux comprendre les défis et les possibilités, au fur et à mesure qu'évoluent les approches provinciales et territoriales concernant la gestion du programme des soins de santé.

L'utilisation stratégique et ciblée du Fonds pour l'innovation de Santé Canada continue à fournir aux régions la capacité de créer des occasions de partenariat, et d'en tirer le meilleur parti, en fonction des questions et des préoccupations locales. Que ce soit en partenariat avec le milieu universitaire, les organismes communautaires non gouvernementaux ou les fondations pour la recherche en santé, les initiatives du Fonds pour l'innovation de Santé Canada visent à déterminer les priorités et les besoins particuliers des communautés et des groupes locaux et à prendre les mesures nécessaires à leur égard.

Le 6 janvier 2006, le sous-ministre délégué de la Santé ont annoncé l'établissement de la Direction générale des affaires publiques, de la consultation et des régions. La nouvelle Direction générale, qui regroupe la Direction des communications, du marketing et de la consultation, les services d'ombudsman externes et internes et les régions, offre l'occasion à Santé Canada de mieux intégrer les perspectives nationales et régionales dans l'ensemble des politiques et des stratégies ainsi que des fonctions de communication et de consultation et elle est essentielle au Ministère pour respecter son engagement à l'égard de la transparence.

La présence de Santé Canada partout au pays se poursuit par l'exécution de programmes et la prestation de services adaptés pour satisfaire aux divers besoins de chacune des six régions géographiques : Colombie-Britannique, Alberta, Saskatchewan, Manitoba, Ontario et Québec, et Atlantique ainsi que le Secrétariat du Nord. Plus d'un tiers des employés de Santé Canada travaillent dans des collectivités situées à l'extérieur de la région de la capitale nationale. La proximité régionale des clients permet au Ministère d'avoir accès à des connaissances et à des capacités particulières qui l'aident à atteindre ses objectifs et ses priorités. Les bureaux régionaux de Santé Canada offrent un lien communautaire qui permet de donner une perspective régionale et une cohérence à la conception et à l'exécution des programmes de protection et de promotion de la santé ainsi qu'à l'élaboration des politiques nationales. Cet engagement axé sur les citoyens permet d'assurer que l'exécution des programmes dans les régions est représentative et à l'écoute des questions et des priorités locales, tout en observant l'intégrité et la responsabilisation des programmes nationaux.

Les liens étroits entre les bureaux régionaux et leurs homologues dans les autres ministères fédéraux offrent de fréquentes occasions de collaboration et de partenariat. La représentation de Santé Canada aux

Une initiative a été mise en oeuvre au cours de la dernière année en vue d'améliorer les services aux Canadiens en renforçant les programmes et le rôle du Ministère dans les régions ainsi qu'en améliorant la communication et la collaboration. Par conséquent, le rôle des directeurs généraux régionaux a été accru afin de pleinement assumer leurs fonctions de principaux représentants de Santé Canada et de responsables de la gestion pour l'ensemble des opérations et des employés du Ministère dans les régions. La création de la nouvelle Direction générale vient compléter le travail en cours et permet au Ministère de continuer à évoluer dans un environnement changeant. Elle permet également à Santé Canada de remplir son engagement continu à assurer une meilleure cohérence et une présence constante à l'échelle nationale et dans chacune des régions.

En reconnaissance aux défis et aux possibilités uniques que représentent l'exécution des programmes et la prestation des services dans diverses communautés nordiques, souvent éloignées, la responsabilité de toutes les activités du Ministère dans les Territoires du Nord-Ouest, le Yukon et le Nunavut relève maintenant du volet des opérations régionales du Secrétariat du Nord. Ce regroupement de responsabilités dans le Nord, au Secrétariat du Nord, donnera une perspective territoriale permanente

Autres sujets
d'intérêt



Tableau 12 : Vérifications et évaluations internes (suite)

Titre du projet	Date d'achèvement prévue ¹	Évaluations à venir	
	Automne 2006	Examen de la mesure et de l'évaluation du rendement à Santé Canada (DGCMI)	
	Automne 2006	Programme de soins à domicile et en milieu communautaire pour les Premières nations et les Inuits – DGSPNI	
	Automne 2006	Programme canadien de nutrition prénatale – DGSPNI	
	Hiver 2006-2007	Initiative sur le diabète chez les Autochtones – DGSPNI	
	Automne 2006	Augmentation des mesures de Santé Canada concernant l'encéphalopathie spongiforme bovine (ESB) – ESB I phase II de Santé Canada et mesures de l'ASPC dans les domaines de l'évaluation des risques et de la recherche thématique – ESB II	
	Hiver 2006-2007	Programme fédéral de la conformité de l'eau potable (DGSES)	
	Hiver 2006-2007	Stratégie fédérale de lutte contre le talagisme	
	Mars 2007	Programme de contributions pour améliorer l'accès aux services de santé dans les communautés de langue officielle en situation minoritaire – DGPS	
	Automne 2006	Système canadien de réglementation des biotechnologies – DGPSA	
	Automne 2006	Stratégie d'accès aux produits thérapeutiques – DGPSA	
	Automne 2006	Programme de recherche sur les produits de santé naturels – DGPSA	
	Automne 2006	Programme de la stratégie antidrogue et des substances contrôlées, stratégie canadienne antidrogue – renouvellement – 2 ^e année – DGSESC	
	Automne 2006	Loi canadienne sur la protection de l'environnement – DGSESC	
	Automne 2006	Rechercher la confiance du public dans la réglementation des pesticides et améliorer l'accès aux produits antiparasitaires – ARLA	
	Hiver 2006-2007	Réductions dans l'examen des dépenses et leur impact sur Santé Canada – CMVE/DMERM	
	Hiver 2006-2007	Conclure des marchés pour l'obtention de services professionnels et de services spéciaux à Santé Canada – CMVE/DMERM	

¹ La « date d'achèvement prévue » est la date à laquelle le rapport de la vérification ou de l'évaluation interne devrait être déposé aux fins d'approbation par le Comité ministériel de vérification et d'évaluation (CMVE) de Santé Canada.

Tableau 12 : Vérifications et évaluations internes

Titre du projet	Date	Vérifications internes récemment terminées	
		Examen de l'administration du contrat de SC avec la First Canadian Health Management Corporation Inc.	Suivi de la vérification dirigée de la Société Santé en Français Inc.
Vérifications internes à venir	Approuvé par le CMVE le 7 avril 2005	Vérification de la gestion des médicaments et autres substances réglementées dans des établissements de la DGSPNI de deux régions choisies	Vérification des contributions du Fonds pour l'adaptation des soins de santé primaires (FASSP) au ministère de la Santé et des Soins de longue durée de l'Ontario
	Approuvé par le CMNE en avril 2006		Vérification de la sécurité de la technologie de l'information (TI) à Santé Canada
Évaluations récemment terminées	Approuvé par le CMNE en 1 ^{er} novembre 2005	Évaluation du protocole d'entente entre les sous-ministres adjoints et les directeurs généraux régionaux	Vérification de la mise en œuvre des Mesures correctives de la Commission de la fonction publique
	Approuvé par le CMNE en novembre 2006		Cadres choisis de gestion et de responsabilisation axés sur les résultats
Évaluation de l'impact du Fonds pour l'adaptation des services de santé	Approuvé par le CMNE en novembre 2005	Évaluation du Programme des partenariats pour l'infrastructure canadienne de la santé	Vérification de programmes sur la santé mentale et les toxicomanies
	Approuvé par le CMNE en novembre 2005		Vérification du programme de la stratégie antidrogue et des substances contrôlées
Évaluation diagnostique de la Division de la gestion et de la diffusion de la recherche	Approuvé par le CMNE en novembre 2005	Politique sur le transfert des services de santé – DGSPNI	Évaluation de l'innovation de Santé Canada
	Approuvé par le CMVE en avril 2006		
Programme Grandir ensemble et Pour des collectivités en bonne santé – DGSPNI	Approuvé par le CMVE en avril 2006	Projets pilotes sur les Services de santé non assurés – DGSPNI	Fonds pour l'adaptation des soins de santé primaires – évaluation interne – Direction générale de la politique de la santé (DGPS)
	Approuvé par le CMVE en avril 2006		
Recouvrement des coûts de l'Agence de réglementation de la lutte anti parasitaire	Approuvé par le CMVE en avril 2006	Programmes de subventions et contributions dans le cadre des politiques et des Stratégies de soins de santé – Examen du système des mesures du rendement – DGPS	La « date d'achèvement prévue » est la date à laquelle le rapport de la vérification ou de l'évaluation interne devrait être déposé aux fins d'approbation par le Comité ministériel de vérification et d'évaluation (CMVE) de Santé Canada.
	Approuvé par le CMVE en juin 2006		

De plus, un autre moyen de promouvoir le développement durable est d'utiliser un système de gestion de l'environnement (SGE). Deux des priorités de la Division des systèmes de gestion de l'environnement sont les suivantes : examen du SGE pour s'assurer qu'il tienne compte des multiples changements au sein du gouvernement fédéral, et réorganisation de la base de données du SGE (la principale ressource d'information relative à l'environnement). Des travaux préliminaires sur la base de données du SGE ont déjà été entrepris et le travail se poursuivra en 2006-2007. Parmi les autres bases de données du Portefeuille de la Santé servant à l'entrée de renseignements sur l'environnement, mentionnons une base de données sur les parcs pour faire le suivi de l'utilisation des véhicules et une base de données sur les déchets dangereux pour certains cours d'eau pollués.

C'est en nous appuyant sur des expériences antérieures et en incorporant les pratiques exemplaires à notre travail que nous réaliserons le développement durable à long terme.

Depuis la première stratégie, Santé Canada s'est employé à instaurer une culture qui reconnaît l'importance du développement durable dans ses opérations. L'approbation d'une politique sur le développement durable en 2000 a permis l'intégration de cinq principes clés (responsabilité partagée, approches intégrées, équité, responsabilisation et amélioration continue) à la troisième stratégie de développement durable du Ministère; ces principes font figure de principes directeurs pour l'élaboration de la prochaine stratégie, qui couvrira la période 2007 à 2010; cette stratégie doit être déposée au Parlement en décembre 2006. Chaque année, le Ministère continuera de faire rapport de ses progrès concernant les engagements de la Stratégie du développement durable.

L'évaluation environnementale stratégique (EES) est un processus systématique et global pour évaluer les effets d'une politique, d'un plan ou d'un programme et des solutions de rechange sur l'environnement, dès les premiers stades de la planification. Santé Canada doit procéder à des EES en respectant la Directive du Cabinet de 2004 sur l'évaluation environnementale des projets de politiques, de plans et de programmes. Santé Canada a élaboré une politique et des lignes directrices relatives à l'évaluation environnementale stratégique pour appuyer les efforts des ministères en vue de cerner les projets ayant des effets positifs ou négatifs importants sur l'environnement et de déterminer les mesures d'amélioration ou d'atténuation. Le Ministère est déterminé à offrir, au besoin, de la formation sur cette initiative au personnel chargé de l'élaboration des politiques et continuera de prendre en compte les effets de nos activités sur l'environnement.

Tableau 11 : Stratégie de développement durable (suite)

ENGAGEMENTS DE LA STRATÉGIE DE DÉVELOPPEMENT DURABLE (suite)	
2.1.1	Santé Canada améliorera l'intégration des facteurs de développement durable au sein du Ministère en élaborant un cadre pour définir les principales activités de planification, activités de suivi et pratiques modernes de gestion auxquelles il serait possible d'incorporer ces facteurs, et intégrera le développement durable à ces domaines, le cas échéant, d'ici le 31 mars 2007.
2.1.2	Santé Canada améliorera l'intégration des facteurs de développement durable au sein du Ministère en intégrant efficacement, s'il y a lieu, le développement durable à ses politiques, à ses mesures législatives et à ses contrats clés de même qu'en établissant un processus officiel pour évaluer cette intégration d'ici le 31 mars 2007.
2.1.3	Santé Canada améliorera la vigilance de ses employés à l'égard du développement durable en élaborant et en menant une campagne de marketing social pour le 31 mars 2007.
2.1.4	Santé Canada améliorera la vigilance de ses employés à l'égard du développement durable en élaborant et en mettant en œuvre un programme ministériel de formation sur le développement durable qu'il devra offrir à au moins 1 000 de ses employés d'ici le 31 mars 2007.
2.1.5	Santé Canada contribuera à mieux faire connaître le développement durable aux employés fédéraux en préparant et en donnant, en partenariat avec d'autres ministères, des comités fédéraux et des réseaux, un cours interministériel sur le développement durable d'ici le 31 mars 2007.
3.1.2	D'ici mars 2007, Santé Canada s'engage à fournir aux gestionnaires d'installations et aux autres gestionnaires ayant compétence sur les installations une formation sur l'exploitation et la gestion durables de ses installations. La formation reposera sur le guide ministériel.
3.2.3	D'ici janvier 2007, Santé Canada commencera à mettre en œuvre et fera rapport des recommandations définies dans le guide et le plan d'action du Ministère.

Tableau 1.1 : Stratégie de développement durable

La stratégie de développement durable de Santé Canada « Incarner le changement désiré » est un plan stratégique de trois ans qui relate aux Canadiens et au Parlement les engagements généraux et particuliers que Santé Canada a pris envers le développement durable. En s'appuyant sur le succès qu'a connu la stratégie précédente, le Ministère, dans sa troisième stratégie, continue avec les thèmes définis dans la stratégie précédente. Il s'agit des thèmes clés suivants :

- ◆ Favoriser la création d'environnements sociaux et physiques sains.
- ◆ Intégrer le développement durable aux processus de décision et de gestion du Ministère.

1.1.1 En partenariat avec les ministères fédéraux, provinciaux et territoriaux de la Santé et de l'Environnement, Santé Canada élaborera une approche intégrée, de la source au robinet, pour la qualité de l'eau potable au Canada.

1.1.2 Santé Canada travaillera avec d'autres ministères fédéraux à élaborer un cadre de conformité pour la qualité de l'eau potable dans les secteurs de compétence fédérale.

1.1.3 Santé Canada, en collaboration avec d'autres ministères fédéraux, réduira la pollution atmosphérique transfrontalière en lançant des projets pilotes qui multiplieront les possibilités de gestion concertée de la qualité de l'air entre les États-Unis et le Canada.

1.1.4 Santé Canada collaborera avec d'autres ministères fédéraux afin d'évaluer les effets des changements climatiques sur la santé et le bien-être de l'être humain et il étudiera et élaborera des approches de planification et de mise en œuvre de l'adaptation dans le cadre du Plan du Canada sur les changements climatiques.

1.1.5 Santé Canada travaillera en collaboration avec des intervenants afin d'élaborer ou de mettre à jour les lignes directrices et les normes à fondement scientifique pour améliorer la sécurité de l'approvisionnement alimentaire et réduire les maladies d'origine alimentaire.

1.1.6 Santé Canada aidera à prévenir l'exploitation des espèces florales et fauniques utilisées à des fins médicinales.

1.1.7 Santé Canada améliorera la démarche qu'il suit pour prendre des décisions réglementaires sur les produits antiparasitaires. Il donnera notamment accès à des produits plus sûrs et fournira de l'information sur les produits antiparasitaires et sur les pratiques durables de lutte antiparasitaire.

1.2.1 Santé Canada travaillera en collaboration avec les Premières nations et les Inuits de même qu'avec les provinces et les territoires à mieux intégrer les services de santé pour assurer aux Premières nations et aux Inuits un système de services de santé durable et homogène.

Tableau 9 : Fondations (subventions conditionnelles)

Au cours des trois prochaines années, Santé Canada versera des contributions au fondations suivantes par l'entremise de subventions conditionnelles:

2006-07	1. Inforoute Santé Canada (Inforoute)
	2. Institution canadien d'information sur la santé
	3. Fondation canadienne de la recherche sur les services de santé

2007-08	1. Inforoute Santé Canada (Inforoute)
	2. Institution canadien d'information sur la santé
	3. Fondation canadienne de la recherche sur les services de santé

2008-09	1. Inforoute Santé Canada (Inforoute)
	2. Institution canadien d'information sur la santé
	3. Fondation canadienne de la recherche sur les services de santé

2009-10	Des renseignements supplémentaires sur ces fondations se trouvent à www.tbs-sct.gc.ca/est-pre/estimF.asp
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Tableau 10 : Initiatives horizontales

Au cours des trois prochaines années, Santé Canada participera aux initiatives horizontales suivantes à titre de ministre responsable ou de partenaire :

2006-07	1. Stratégie canadienne antidrogue (responsable)
	2. Rechercher la confiance du public dans la réglementation des pesticides et améliorer l'accès aux produits antiparasitaires (responsable)
	3. Stratégie fédérale de développement de la petite enfance (DPE) autochtone et des Premières nations (responsable)

Des renseignements supplémentaires sur ces initiatives horizontales se trouvent à www.tbs-sct.gc.ca/est-pre/estimF.asp

Tableau 8 : Renseignements sur les programmes de paiements de transferts (suite)

- ◆ Paiements aux provinces et territoires et aux organismes nationaux à but non lucratifs pour appuyer l'élaboration des programmes de réadaptation en matière d'alcoolisme et de toxicomanie
- ◆ Fonds des initiatives communautaires de la Stratégie antidrogue (FICSA)

2008-2009

- ◆ Contributions à l'Organisation pour la promotion de la santé des peuples autochtones
- ◆ Paiements à des bandes, associations ou groupes d'Indiens pour la gestion et à la prestation des services de santé
- ◆ Contributions à la gouvernance en santé et le soutien à l'infrastructure des Premières nations et des Inuits
- ◆ Contribution aux programmes communautaires des Premières nations et des Inuits
- ◆ Contributions au programme d'établissements de santé et d'immobilisations des Premières nations et des Inuits
- ◆ Contributions pour les prestations en soins de santé des Premières nations et des Inuits
- ◆ Contribution pour la protection de la santé des Premières nations et des Inuits
- ◆ Contributions pour les soins de santé primaires des Premières nations et des Inuits
- ◆ Contribution au projet pilote de prestations en soins de santé non assurés de Bigstone
- ◆ Subventions aux Fonds de transport pour raison médicale du Nunavut
- ◆ Subvention nominative au Conseil canadien de la santé
- ◆ Subvention à l'Institut canadien sur la sécurité des patients
- ◆ Subvention proposée à l'Office canadien de coordination de l'évaluation des technologies de la santé
- ◆ Contributions dans le cadre des politiques et des stratégies en matière de soins de santé
- ◆ Programme de contributions pour améliorer l'accès des communautés minoritaires de langues officielles (CMLO) aux services de santé
- ◆ Subvention à la Société canadienne du sang
- ◆ Contributions à l'appui de la Stratégie fédérale de lutte contre le tabagisme
- ◆ Paiements aux provinces et territoires et aux organismes nationaux à but non lucratifs pour appuyer l'élaboration des programmes de réadaptation en matière d'alcoolisme et de toxicomanie
- ◆ Fonds des initiatives communautaires de la Stratégie antidrogue (FICSA)

Pour obtenir plus d'information sur les paiements de transfert, consultez le site Web suivant : www.tbs-sct.gc.ca/est-pré/estime.asp

Tableau 8 : Renseignements sur les programmes de paiements de transferts

Au cours des trois prochaines années, Santé Canada gèrera les programmes de paiements de transferts de plus de 5 millions \$.

2006-2007

- ◆ Contributions à l'Organisation pour la promotion de la santé des peuples autochtones
- ◆ Paiements à des bandes, associations ou groupes d'indiens pour la gestion et à la prestation des services de santé
- ◆ Contributions à la gouvernance en santé et le soutien à l'infrastructure des Premières nations et des Inuits
- ◆ Contribution aux programmes communautaires des Premières nations et des Inuits
- ◆ Contributions au programme d'établissements de santé et d'immobilisations des Premières nations et des Inuits
- ◆ Contributions pour les prestations en santé des Premières nations et des Inuits
- ◆ Contribution pour la protection de la santé des Premières nations et des Inuits
- ◆ Contributions pour les soins de santé primaires des Premières nations et des Inuits
- ◆ Contribution au projet pilote de prestations en soins de santé non assurés de Bigstone
- ◆ Subventions aux Fonds de transport pour raison médicale du Nunavut
- ◆ Subvention nominative au Conseil canadien de la santé
- ◆ Subvention à l'Institut canadien sur la sécurité des patients
- ◆ Subvention proposée à l'Office canadien de coordination de l'évaluation des technologies de la santé
- ◆ Contributions au Fonds pour l'adaptation des soins de santé primaires (FASSP)
- ◆ Contributions dans le cadre des politiques et des stratégies en matière de soins de santé
- ◆ Programme de contributions pour améliorer l'accès des communautés minoritaires de langues officielles (CMLO) aux services de santé
- ◆ Subvention à la Société canadienne du sang
- ◆ Contributions à l'appui de la Stratégie fédérale de lutte contre le tabagisme
- ◆ Paiements aux provinces et territoires et aux organismes nationaux à but non lucratifs pour appuyer l'élaboration des programmes de réadaptation en matière d'alcoolisme et de toxicomanie
- ◆ Fonds des initiatives communautaires de la Stratégie antidrogue (FICSA)

2007-2008

- ◆ Contributions à l'Organisation pour la promotion de la santé des peuples autochtones
- ◆ Paiements à des bandes, associations ou groupes d'indiens pour la gestion et à la prestation des services de santé
- ◆ Contributions à la gouvernance en santé et le soutien à l'infrastructure des Premières nations et des Inuits
- ◆ Contribution aux programmes communautaires des Premières nations et des Inuits
- ◆ Contributions au programme d'établissements de santé et d'immobilisations des Premières nations et des Inuits
- ◆ Contributions pour les prestations en soins de santé des Premières nations et des Inuits
- ◆ Contribution pour la protection de la santé des Premières nations et des Inuits
- ◆ Contributions pour les soins de santé primaires des Premières nations et des Inuits
- ◆ Contribution au projet pilote de prestations en soins de santé non assurés de Bigstone
- ◆ Subventions aux Fonds de transport pour raison médicale du Nunavut
- ◆ Subvention nominative au Conseil canadien de la santé
- ◆ Subvention à l'Institut canadien sur la sécurité des patients
- ◆ Subvention proposée à l'Office canadien de coordination de l'évaluation des technologies de la santé
- ◆ Contributions dans le cadre des politiques et des stratégies en matière de soins de santé
- ◆ Programme de contributions pour améliorer l'accès des communautés minoritaires de langues officielles (CMLO) aux services de santé
- ◆ Subvention à la Société canadienne du sang
- ◆ Contributions à l'appui de la Stratégie fédérale de lutte contre le tabagisme

Tableau 7 : Initiatives réglementaires majeures (suite)

Réglements		Résultats attendus
Loi sur les produits antiparasitaires (Nouvelle réglementation portant sur les comités de révision)	La nouvelle Loi sur les produits antiparasitaires contient un processus par lequel un comité de révision devra réexaminer les décisions majeures d'enregistrement. Le règlement révisé identifiera les paramètres qui serviront à établir ces comités de révision, précisera également la sélection et la rémunération des membres de ces comités. Le public pourra ainsi mieux participer au processus de réglementation, favorisant ainsi une transparence plus grande et une confiance accrue des intervenants et du public dans la mise en œuvre de la réglementation à l'usage des pesticides.	
	Loi sur les produits antiparasitaires (La nouvelle réglementation portant sur la déclaration des effets indésirables causés par l'usage de produits antiparasitaires)	Le règlement révisé précisera les renseignements prescrits et le calendrier pour déclarer les effets indésirables des produits antiparasitaires. La protection de l'environnement et de la santé seront améliorées grâce à cette contribution.

Tableau 7 : Initiatives réglementaires majeures (suite)

ACTIVITÉ DU PROGRAMME : ENVIRONNEMENT SAIN ET SÉCURITÉ DES CONSOMMATEURS	
Résultats	Résultats attendus
Loi réglementant certaines drogues et autres substances (Règlement en vue d'étendre l'autorité des membres d'une profession de la santé réglementée pour prescrire, le cas échéant, des substances contrôlées)	La législation fédérale imposera des restrictions nécessaires à la pratique professionnelle de tout membre d'une profession de la santé réglementée par les autorités provinciales ou territoriales (PT), y compris des praticiens de la médecine, de la dentisterie, de la médecine vétérinaire, de la médecine pédiatrique, des sage-femmes et des infirmières praticiennes, en ce qui concerne l'utilisation de substances contrôlées pour traiter leurs patients. Ce résultat sera atteint au cours des 2 ou 3 prochaines années, au fur et à mesure que la réglementation fédérale, provinciale et territoriale est modifiée pour permettre aux professionnels de la santé de prescrire des substances contrôlées en vertu des normes de pratique professionnelle définies par leurs autorités réglementaires. La pleine réalisation sera évaluée par un meilleur alignement des cadres réglementaires fédéral, provincial et territorial, qui régissent l'utilisation appropriée des substances contrôlées à des fins médicales.
ACTIVITÉ DU PROGRAMME : ENVIRONNEMENT SAINS ET SÉCURITÉ DES CONSOMMATEURS	
Réglements	Résultats attendus
Règlement sur la publicité du tabac	La sensibilisation accrue des risques pour la santé causés par le tabac en rendant obligatoire dans la publicité les nouveaux messages relatifs à la santé. Cette sensibilisation sera évaluée grâce à des sondages.
Loi sur le tabac (Modification du Règlement sur l'étiquetage du tabac)	La sensibilisation accrue des risques pour la santé causés par le tabac en rendant obligatoires sur les paquets les nouveaux messages relatifs à la santé. Cette sensibilisation sera évaluée grâce à des sondages.
Règlement sur le tabac (Modifications concernant les descripteurs « légère » et « douce »)	Remédier à la confusion des fumeurs en ce qui concerne ces descripteurs. Sensibiliser davantage en préconisant d'opter pour des cigarettes dépourvues de catégorie spécifique, ce qui représente la solution la plus « sûre ». Les résultats seront évalués grâce à des sondages.
Règlement sur la promotion du tabac au détail	Une visibilité réduite de la promotion du tabac au détail. Les résultats seront évalués par des sondages chez les détaillants.
ACTIVITÉ DU PROGRAMME : RÉGLEMENT SUR LES PRODUITS ANTIPARASITAIRES	
Réglements	Résultats attendus
Règlement sur les produits antiparasitaires	Le règlement révisé comprendra des changements visant à clarifier et à actualiser le Règlement sur les produits antiparasitaires (RPA), afin qu'il concorde avec la nouvelle Loi sur les produits antiparasitaires, et visant à officialiser les procédures et pratiques courantes en vue d'une meilleure application.
Loi sur les produits antiparasitaires (Modifications apportées au Règlement sur les sanctions administratives pécuniaires en matière d'agriculture et d'agro-alimentaire)	Le règlement révisé a pour but de répondre aux violations en vertu de la nouvelle Loi sur les produits antiparasitaires et son Règlement.

Tableau 7 : Initiatives réglementaires majeures (suite)

Réglements	Résultats attendus
Règlement sur les aliments et drogues (Étiquetage amélioré)	Une protection plus grande des consommateurs allergiques par le biais de l'étiquetage obligatoire de trophallergènes spécifiques, des sources de gluten et des sulfites lorsqu'ils représentent 10 parties par million ou plus, sur les étiquettes des produits alimentaires préemballés, qu'ils aient été ajoutés directement ou non.
Règlement sur les aliments et drogues (Étiquetage obligatoire des viandes et volailles hachées et crues)	La réduction des toxi-infections alimentaires comme conséquence d'une bonne indication de renseignements de manipulation sécuritaire sur les étiquettes de ces produits qui, de part leur état cru, peuvent introduire, dans l'environnement de la préparation alimentaire, des bactéries entraînant des maladies.
Règlement sur les aliments et drogues (Allégations relatives aux effets sur la santé)	L'ajout de deux allégations, relatives aux effets sur la santé concernant les régimes, à la liste d'allégations que les fabricants peuvent utiliser pour promouvoir les aliments-santé, p.ex. : les fruits, les légumes et les grains entiers, et réduire ainsi les risques des maladies du coeur, d'acide folique et les risques de défaillance du tube neural.
Règlement sur les aliments et drogues (Saccharine)	La disponibilité d'un édulcorant puissant afin de permettre une plus grande variété de produits alimentaires faibles en sucre ou sans sucre, au profit des consommateurs qui souhaitent se procurer ce genre de produits.
Règlement sur les aliments et drogues (Caféine)	Des renseignements d'étiquetage supplémentaires portant sur les niveaux de caféine contenus dans les boissons préemballées, y compris les boissons énergisantes contenant de la caféine, afin de permettre aux consommateurs de faire un choix éclairé sur leur consommation de caféine.
Règlement sur les aliments et drogues (Étiquetage du jus non pasteurisé)	La réduction de toxi-infections alimentaires reliées à la consommation des jus non pasteurisés préemballés en fournissant des renseignements supplémentaires sur les étiquettes de ces produits.
Règlement sur les aliments et drogues (Révisions apportées à la section 12 – Eau et glace préemballées)	Moderniser et élargir les exigences en matière d'étiquetage et de sécurité pour les produits préemballés contenant l'eau et de la glace.
Règlement sur les aliments et drogues (Règlement modifiant le Programme d'accès spécial)	Le Programme d'accès spécial actuel permet l'utilisation de drogues non autorisées prescrites à des patients sur une base individuelle. La modification permettra la distribution en bloc des drogues non autorisées à la population et l'accumulation de stocks pour faire face aux urgences en santé publique.
Règlement sur les aliments et drogues (Règlement modifiant les dispositions concernant la protection des données)	On modifie les dispositions concernant la protection des données afin de rendre plus efficace la protection des données pour une période de huit ans, en ce qui concerne les médicaments innovateurs qui contiennent des ingrédients médicamenteux non approuvés, au préalable, pour être vendus au Canada. On protégera ainsi, pour une période supplémentaire de six mois, toute proposition, y compris les études en pédiatrie qui ont été conçues et menées dans le but d'améliorer notre connaissance des drogues utilisées par les groupes d'âge pédiatrique.

Tableau 7 : Initiatives réglementaires majeures (suite)

Réglements	Résultats attendus	On élabore un nouveau cadre réglementaire fondé sur des principes scientifiques objectifs et la gestion du risque, y compris les exigences révisées d'une homologation initiale des nouveaux produits, des dispositions facilitant les conditions d'homologation (p.ex. : les exigences après la mise en marché), la réglementation concernant le contenu et les révisions des monographies de produits, des dispositions pour une évaluation continue et une nouvelle évaluation des homologations, de nouveaux instruments d'application et d'observation de la réglementation, une réglementation concernant l'émission d'outils de communication des risques et enfin, des dispositions pour la participation du public dans le processus de réglementation.
ACTIVITÉ DE PROGRAMME : RÉGLEMENT SUR LES PRODUITS ANTIPARASITAIRES		
Réglementation	Résultats attendus	Le nouveau règlement précisera la manière dont sera recueillie l'information concernant les ventes de produits antiparasitaires, en indiquant les exigences pour enregistrer, retenir et établir des rapports sur les ventes de produits antiparasitaires.
PARTIE B - ACTIVITÉS EN COURS		
ACTIVITÉ DU PROGRAMME : PRODUITS DE SANTÉ ET ALIMENTS		
Réglements	Résultats attendus	Le nouveau règlement visera à équilibrer les besoins des cellules sans danger, des tissus et des organes de haute qualité, avec le besoin d'assurer la disponibilité des cellules, des tissus humains et des organes pour la transplantation. Le règlement de la phase I sera axé sur les exigences de sécurité de base pour les cellules, les tissus et les organes humains. Le règlement de la phase II inclura des exigences de matière de déclaration des événements indésirables et une stratégie d'amélioration de l'observation et de l'application.
Loi sur les aliments et drogues (Nouveau cadre réglementaire pour les cellules, les tissus humains et les organes aux fins de transplantation)	Loi sur les aliments et drogues (Nouveau règlement concernant le sang et les composants du sang)	Le nouveau règlement visera à trouver un équilibre entre le besoin en sang et en composants du sang sans danger et le besoin d'assurer leur disponibilité aux fins de transfusion. Il inclura des exigences de sécurité de base, des exigences en matière de déclaration des événements indésirables et une stratégie d'amélioration de l'observation et de l'application.
Réglement sur les aliments et drogues (Modification des dispositions concernant la plasmaphérèse à la section 4 de la partie C)	Loi sur les aliments et drogues (Modification du Règlement portant sur le traitement et la distribution de sperme aux fins de la conception assistée)	Le Règlement ainsi modifié reflètera les méthodes et pratiques courantes utilisées pour recueillir le plasma humain de même qu'une liste des maladies transmissibles pour lesquelles des tests doivent être conduits dans le but de maximiser la sûreté du plasma et la sécurité des donneurs de plasma.
Réglement sur les aliments et drogues (Ajout de vitamines et de minéraux dans les aliments)	Loi sur les aliments et drogues (Ajout de vitamines et de minéraux dans les aliments)	La facilitation d'un choix plus grand pour les consommateurs et de l'innovation industrielle en révisant la réglementation concernant l'ajout de vitamines et d'éléments nutritifs minéraux dans les aliments en prenant en compte le rôle de l'ajout nutritif dans les aliments, les besoins et les attentes des consommateurs et les demandes de l'industrie.

Tableau 7 : Initiatives réglementaires majeures

PARTIE A – NOUVELLES INITIATIVES	
ACTIVITÉ DE PROGRAMME : POLITIQUE, PLANIFICATION ET INFORMATION EN SANTÉ	
Résultats attendus	Réglements
Le nouveau règlement protégera la santé et la sécurité des Canadiens et qui ont recours aux techniques de la procréation assistée (PA) et assurera que la recherche connexe, visant à chercher des traitements pour l'infertilité et les maladies, se déroule dans un environnement contrôlé. Les activités réglementées englobent la recherche sur les embryons, les pratiques cliniques et de laboratoire et les diagnostics préimplantatoires génétiques. Le cadre de réglementation comprendra également un cadre d'homologation pour les activités du PA ainsi que des dispositions régissant le remboursement des dépenses, les conseils et la divulgation des renseignements de santé.	Règlement en vertu de la Loi concernant la procréation assistée

ACTIVITÉ DE PROGRAMME : PRODUITS DE SANTÉ ET ALIMENTS	
Résultats attendus	Réglements
Modification à la partie C, section 3 du Règlement sur les aliments et drogues afin de déroger à l'exigence de classer les demandes d'essais cliniques pour certaines études radiopharmaceutiques. Le Règlement ainsi modifié permettra d'éliminer le fardeau réglementaire qui pèse sur certaines recherches réglementaires de base limitées, tout en s'assurant que la sécurité du patient n'est pas compromise.	Règlement sur les aliments et drogues (Modifications à la section 3 concernant les produits radiopharmaceutiques par émission de positons)
En vertu de la section 8 du Règlement sur les aliments et drogues, les fabricants de nouveaux médicaments destinés à la vente au Canada doivent fournir les preuves substantielles de leur efficacité clinique sur l'homme. Cette initiative donnera à Santé Canada le mécanisme formel pour approuver les produits qui ont prouvé de façon significative leur efficacité clinique chez les animaux ou les études in-vitro pour l'usage dans les situations d'urgence, et pour satisfaire aux mesures de préparatifs d'urgence, tels que l'approbation et la distribution d'un vaccin pour traiter et prévenir un virus de grippe pandémique.	Règlement sur les aliments et drogues (Interdiction de l'importation à des fins personnelles)
Élargir la portée de l'interdiction d'importer des médicaments à usage vétérinaire pour inclure l'importation à des fins personnelles de drogues destinées à être utilisées pour les animaux élevés pour leur viande, afin d'éviter que des résidus potentiellement dangereux soient incorporés aux aliments provenant des animaux traités avec ces mêmes drogues.	Règlement sur les aliments et drogues (Carbadox)
Interdiction de la vente de produits contenant du carbadox et destinés à la vente au Canada afin d'éviter que des résidus potentiellement dangereux soient incorporés aux aliments provenant des animaux traités avec cette même drogue.	Règlement sur les appareils médicaux (Insérer des exigences supplémentaires pour l'essai expérimental d'appareils médicaux)
Le Règlement modifié permettra de dissiper les risques associés au retraitement des appareils à usage unique, en exigeant que les machines de retraitement des appareils à usage unique opèrent en vertu d'un programme d'homologation fondé sur des normes et qui serait dirigé par Santé Canada.	Règlement sur les appareils médicaux (Modification pour réglementer le retraitement des appareils à usage unique)

**Tableau 6 : Besoins en ressources par direction générale
et activité de programme (en millions de dollars)**

(en millions de dollars)						
Politique, planification et information en santé	Produits de santé et aliments	Environnement sain et sécurité des consommateurs	Réglementation des produits antiparasitaires	Santé des Premières nations et des Inuits	Total des dépenses prévues	

2006-2007

Direction générale de la politique de la santé	269,6					269,6
Direction générale des produits de santé et des aliments		204,4				204,4
Direction générale de la santé environnementale et de la sécurité des consommateurs			237,5			237,5
Agence de réglementation de la lutte antiparasitaire				40,1		40,1
Direction générale de la santé des Premières nations et des Inuits				1 997,9		1 997,9
Direction générale du contrôleur ministériel	3,2	9,2	8,6	2,0	16,7	39,7
Direction générale des services de gestion	7,9	24,3	21,9	4,8	41,3	100,2
Direction générale des services ministériels*	7,7	24,2	21,9	4,7	63,2	121,7
Total	288,4	262,1	289,9	51,6	2 119,1	3 011,1

Remarque :

* Comprend des secteurs comme les suivants : communications, services juridiques, Bureau de l'expert scientifique en chef, Bureau de la vérification et de la responsabilisation, bureaux exécutifs et bureaux des directeurs généraux régionaux

(en millions de dollars)		2006-2007
Tableau 4 : Services reçus à titre gracieux		
Locaux fournis par Travaux publics et Services gouvernementaux Canada (TPSGC)	36,6	
Contributions de l'employeur aux primes du régime d'assurance des employés et dépenses payées par le SCT (sauf les fonds renouvelables) Contribution de l'employeur aux régimes d'avantages sociaux des employés et dépenses payées par le SCT	44,1	
Indemnisation des accidents du travail assurée par Ressources humaines et Développement des compétences Canada	0,8	
Traitement et dépenses connexes liés aux services juridiques fournis par le ministère de la Justice	3,2	
Total des services reçus à titre gracieux en 2006-2007	84,7	

Tableau 5 : Sources des revenus disponibles et des revenus non disponibles					
		(en millions de dollars)			
		Prévisions de revenus 2005-2006	Revenus prévus 2006-2007	Revenus prévus 2007-2008	Revenus prévus 2008-2009
REVENUS DISPONIBLES					
Produits de santé et aliments	37,7	41,2	41,2	41,2	41,2
Environnement sain et sécurité	12,0	15,4	15,7	15,7	16,0
des consommateurs					
Réglementation des produits antiparasitaires	5,9	7,0	7,0	7,0	7,0
Santé des Premières nations et des Inuits	3,4	5,5	5,5	5,5	5,5
Total des revenus disponibles	59,0	69,1	69,4	69,4	69,7
REVENUS NON DISPONIBLES (en millions de dollars)					
		Prévisions de revenus 2005-2006	Revenus prévus 2006-2007	Revenus prévus 2007-2008	Revenus prévus 2008-2009
Produits de santé et aliments	3,9	3,9	3,9	3,9	3,9
Environnement sain et sécurité	1,7	1,7	1,7	1,7	1,7
des consommateurs					
Réglementation des produits antiparasitaires	1,0	1,0	1,0	1,0	1,0
Santé des Premières nations et des Inuits	2,3	2,3	2,3	2,3	2,3
Total des revenus non disponibles	8,9	8,9	8,9	8,9	8,9
Total des revenus disponibles et non disponibles	67,9	78,0	78,3	78,3	78,6

		Total pour le Ministère	
1	Dépenses de fonctionnement	1 674,4	1 552,6
5	Subventions et contributions	1 189,3	1 201,8
(1)	Ministre de la Santé – salaire et allocation automobile	0,1	0,1
(1)	Contributions aux avantages sociaux des employés	111,5	101,2
		2 975,4	2 855,7

	Libelle tronqué pour le poste voté ou législatif	Budget principal	Budget précédent
2006-2007			

Tableau 3 : Postes votes et législatifs indiqués dans le Budget principal des dépenses (en millions de dollars)

Total		1 851,3	3,9	98,1	1 091,2	3 044,5	-69,1	2 975,4	35,7	3 011,1
Politique, planification et information en santé	95,6	57,1	135,9	288,6	-0,2	288,6				
Produits de santé et aliments	291,9	1,4	5,9	4,0	-41,2	262,0			0,1	262,1
Environnement sain et sécurité des consommateurs	260,4	1,0	5,1	39,6	-15,4	290,7			-0,8	289,9
Réglementation des produits antiparasitaires	58,7			58,7	-7,0	51,7			-0,1	51,6
Santé des Premières Nations et des Inuits	1 144,7	1,5	30,0	911,7	-5,5	2 082,4			36,7	2 119,1

[illegible]

Tableau 2 : Activités de programme pour 2006-2007 (en millions de dollars)

Tableau 1 : Dépenses prévues du Ministère et équivalents temps plein

(en millions de dollars)				
Dépenses prévues 2008-2009	Dépenses prévues 2007-2008	Dépenses prévues 2006-2007	Prévision des dépenses 2005-2006	Total – Budget principal des dépenses
214,9	218,2	288,6	448,4	
283,1	298,4	303,2	262,4	
301,3	301,7	306,1	287,8	
54,1	58,2	58,7	58,3	
2 138,8	2 126,9	2 087,9	1 867,7	
2 992,2	3 003,4	3 044,5	2 924,6	
69,7	69,4	69,1	68,9	
2 922,5	2 934,0	2 975,4	2 855,7	

Rajustements : (1)

Mandats spéciaux de la gouverneure générale :

Report des fonds du budget de fonctionnement (poste horizontal)

Fonds supplémentaires à l'appui des services de santé des Autochtones à la suite de la Réunion spéciale entre les premiers ministres et les dirigeants autochtones tenue le 13 septembre 2004

Fonds supplémentaires fournis aux territoires pour les coûts de transport pour raisons médicales et la réforme des systèmes de santé (crédit 5 du CT)

Fonds supplémentaires pour des initiatives liées au Plan décennal pour consolider les soins de santé, notamment la réduction des délais d'attente, l'intégration des professionnels de la santé formés à l'étranger et l'amélioration des rapports sur le renforcement des services de santé à la population canadienne (15 millions de dollars provenant du crédit 5 du CT)

Financement pour assurer l'innocuité des produits pharmaceutiques, notamment par un renforcement de la surveillance des essais cliniques, par la surveillance des médicaments et des matériels médicaux sur le marché et par la mise en œuvre de nouveaux règlements sur les transfusions sanguines et les transplantations d'organes (poste horizontal)

Financement pour améliorer les programmes d'apprentissage et de garde des jeunes enfants destinés aux membres des Premières nations dans les réserves (poste horizontal)

Fonds supplémentaires pour les évaluations des risques pour la santé et les mesures de protection liées à la Loi canadienne sur la protection de l'environnement

Activités visant à atténuer l'incidence de la crise de l'encéphalopathie spongiforme bovine (ESB) (poste horizontal)

Financement pour exécuter des programmes fédéraux et assurer la prestation de services fédéraux, dont des services de santé, à deux communautés innues du Labrador (Stratégie globale de guérison des Innus du Labrador) (poste horizontal)

Financement pour poursuivre la mise en œuvre du plan du gouvernement relativement à la création d'une capacité de recherche et de développement de base dans le domaine de la génomique (poste horizontal)

Fonds supplémentaires destinés au Programme d'accès aux médicaments, qui fournit un accès abordable aux produits pharmaceutiques brevetés au Canada pour le traitement du VIH/sida, du paludisme, de la tuberculose et d'autres épidémies, dans les pays les moins développés et les pays en développement

Fonds pour l'évaluation, la gestion et l'assainissement des sites contaminés fédéraux (poste horizontal)

Financement pour améliorer les initiatives à l'appui de la Stratégie canadienne sur le VIH/sida (poste horizontal) (0,8 millions de dollars provenant du crédit 5 du CT)

Financement pour améliorer la capacité de détecter une éventuelle pandémie de grippe et à réagir en conséquence, notamment par la prise de mesures d'urgence, la constitution de réserves d'antiviraux et la mise en place de technologies permettant la création rapide de vaccins (poste horizontal)

0,4

Renseignements
supplémentaires

3

Contrôle des maladies transmissibles	www.hc-sc.gc.ca/ahc-asc/branch-dirigen/fnihb-dgspni/phcphd-dsspsp/cdcd-dcmt/index_f.html
Initiative en santé bucco-dentaire	www.hc-sc.gc.ca/ahc-asc/activit/strateg/fnih-spni/cohi-isbde_f.html
Hygiène du milieu	www.hc-sc.gc.ca/ahc-asc/branch-dirigen/fnihb-dgspni/phcphd-dsspsp/ehd-dse/index_f.html
Qualité de l'eau potable	www.hc-sc.gc.ca/fnih-spni/promotion/water-eau/index_f.html

Soins à domicile et en milieu communautaire	www.hc-sc.gc.ca/fnih-spni/services/home-domicile/index_f.html
Cybersanté	www.hc-sc.gc.ca/fnih-spni/services/health-esante/index_f.html
Initiative relative aux ressources humaines en santé chez les Autochtones	www.hc-sc.gc.ca/ahc-asc/activit/strateg/fnih-spni/ahhri-irhs_f.html

Programmes de soins de santé primaires

Description : Des services de soins de santé complets sont offerts aux communautés éloignées ou isolées des Premières nations et des Inuits pour compléter et appuyer les services de soins de santé primaires offerts par les autorités provinciales, territoriales et régionales dont les services de santé actifs et d'urgence. Santé Canada assure des liens vers les soins appropriés dispensés par d'autres fournisseurs de soins de santé ou d'autres institutions au besoin, selon l'état du patient. Le continuum des services de soins communautaires et de soins de santé primaires comprend les activités de prévention des maladies et des blessures et de promotion de la santé. Ces programmes comprennent : le Programme de soins à domicile et en milieu communautaire des Premières nations et des Inuits et la Stratégie sur la santé buccodentaire

Résultats escomptés

Amélioration de l'accès à des programmes et à des services de soins de santé primaires pour les personnes, les familles et les communautés des Premières nations et des Inuits

- ◆ Nombre et pourcentage de communautés dans lesquelles il existe des programmes
- ◆ Nombre de centres de traitement selon le type dans les communautés
- ◆ Taux d'utilisation des clients éligibles – Avantages de soins dentaires

2006-2007*		2007-2008*		2008-2009*	
Dépenses	232,9	Dépenses salariales	66,7	Dépenses	233,7
Dépenses salariales	66,4	Dépenses	237,8	Dépenses salariales	65,7

* En fonction de l'architecture de l'activité de programme, avec les ajustements pour les présentations au Conseil du Trésor. Nous avons présumé qu'aucune croissance ne serait appliquée au nouveau financement et au financement ne faisant pas partie d'une enveloppe. Nous avons également présumé qu'une croissance de 3 % serait applicable à l'enveloppe budgétaire. Seulement les dépenses salariales sont présentées étant donné que les renseignements sur le nombre d'ETP ne sont pas disponibles à ce niveau.

** Les montants sont en millions de dollars

Liens internet

D'autres programmes et services qui contribuent à cette activité de programme représentent 1 539,9 millions de dollars; pour plus de renseignements sur ces programmes et services consultez les sites Web suivants :

Programme d'aide préscolaire aux Autochtones
www.hc-sc.gc.ca/fnih-spni/famil/develop/ahsor-papa_intro_f.html

Programme de lutte contre l'ensemble des troubles causés par l'alcoolisation fœtale

www.hc-sc.gc.ca/fnih-spni/famil/preg-gros/index_f.html

Initiative sur le diabète chez les Autochtones
www.hc-sc.gc.ca/fnih-spni/diseases-maladies/diabete/index_f.html

Services de santé non assurés
www.hc-sc.gc.ca/ahc-asc/branch-dirigen/fnihb-dgspni/nihbd-dssna/index_f.html

Stratégie de lutte contre le tabagisme
www.hc-sc.gc.ca/fnih-spni/substan/tobac-tabac/index_f.html

Programme national de lutte contre l'abus de l'alcool et des drogues chez les Autochtones
www.hc-sc.gc.ca/fnih-spni/substan/ads/index_f.html

Pensionnats pour Autochtones
www.hc-sc.gc.ca/fnih-spni/services/indresident/index_f.html

Prévention des blessures
www.hc-sc.gc.ca/fnih-spni/promotion/injury-bless/index_f.html

Programmes sur la santé environnementale et la recherche

Description : Ces programmes sont conçus pour réduire le risque d'exposition aux dangers environnementaux pour la santé par l'amélioration de la capacité des communautés de mettre en œuvre des mesures visant à les gérer, à les limiter et à les contrôler. Ces programmes permettent également de créer et de maintenir des milieux communautaires sains et sécuritaires au moyen des mesures suivantes : des enquêtes menées sur les éclosons possibles liées à la santé environnementale, la sensibilisation accrue aux dangers de l'environnement pour la santé, comme les maladies d'origine hydrique, les intoxications alimentaires et les infections transmises par vecteurs, notamment les problèmes de santé attribuables à la qualité médiocre de l'air intérieur, comme les moisissures dans les maisons. Ces programmes visent également la lutte antiparasitaire et la capacité en ressources humaines de s'adapter aux conditions de l'environnement, le maintien des milieux sains et la lutte sécuritaire aux dangers de l'environnement. Ces programmes comprennent : la Stratégie de gestion de l'eau des Premières Nations, le virus du Nil occidental, les sites contaminés, le transport des marchandises dangereuses, la salubrité des aliments, les inspections relatives à la santé dans les installations, le logement et la recherche.

Résultats escomptés

Amélioration de la gestion des risques de l'environnement pour la santé

- ◆ Nombre de communautés qui bénéficient d'agents d'hygiène du milieu et de personnes formées chargées de surveiller la qualité de l'eau dans les communautés
- ◆ Nombre de communautés qui sont équipées de trousseaux d'analyse et d'échantillonnage de l'eau

2006-2007*		2007-2008*		2008-2009*	
Dépenses	46,1	Dépenses	46,7	Dépenses	22,2
Dépenses salariales	11,9	Dépenses salariales	11,9	Dépenses salariales	9,1

* En fonction de l'architecture de l'activité de programme, avec les ajustements pour les présentations au Conseil du Trésor. Nous avons présumé qu'aucune croissance ne serait appliquée au nouveau financement et au financement ne faisant pas partie d'une enveloppe. Nous avons également présumé qu'une sur le nombre d'ETP ne sont pas disponibles à ce niveau.

** Les montants sont en millions de dollars

Programmes de lutte contre les maladies transmissibles

Description : Ces programmes appuient les besoins et les priorités en santé publique au moyen de la conception, de la mise en œuvre et de l'exécution des programmes visant à protéger les communautés des Premières nations et des Inuits des maladies transmissibles de même qu'à mettre en œuvre des mesures servant à gérer, à limiter et à contrôler les risques d'écllosion. Ces programmes comprennent : la prévention de la tuberculose, l'immunisation, la prévention du VIH/sida et les urgences sanitaires liées aux maladies transmissibles.

Résultats escomptés

Amélioration de l'accès à des programmes de contrôle et de prévention des maladies transmissibles pour les personnes, les familles et les communautés des Premières nations et des Inuits

- ◆ Nombre et pourcentage de communautés dans lesquelles il existe des programmes

2006-2007*		2007-2008*		2008-2009*	
Dépenses	26,0	Dépenses	26,8	Dépenses	28,0
Dépenses salariales	6,1	Dépenses salariales	6,4	Dépenses salariales	6,4

* En fonction de l'architecture de l'activité de programme, avec les ajustements pour les présentations au Conseil du Trésor. Nous avons présumé qu'aucune croissance ne serait appliquée au nouveau financement et au financement ne faisant pas partie d'une enveloppe. Nous avons également présumé qu'une sur le nombre d'ETP ne sont pas disponibles à ce niveau.

** Les montants sont en millions de dollars

Programmes de santé mentale et de lutte contre les toxicomanies

Description : Ces programmes fournissent des services de consultation adaptés à la culture, des services de promotion de la santé et de prévention et des services de mieux-être mental qui sont, pour la plupart, dispensés par des Autochtones. Ces programmes comprennent : Développement de communautés en santé, le programme Grandir ensemble, le Programme national de lutte contre l'abus d'alcool et d'autres drogues pour les Autochtones - traitement résidentiel, le Programme national de lutte contre l'abus d'alcool et d'autres drogues pour les Autochtones - en milieu communautaire, le Programme sur l'abus des solvants, la Stratégie de lutte contre le tabagisme chez les Premières nations et les Inuits, la Stratégie nationale de prévention du suicide chez les jeunes Autochtones, la Stratégie de guérison complète des Inus du Labrador, et le Programme de soutien en santé mentale des pensionnats canadiens.

Résultats escomptés

Amélioration du continuum des programmes et des mesures de soutien dans les communautés des Premières nations et des Inuits

Accroissement de la participation des personnes, des familles et des communautés des Premières nations et des Inuits aux programmes et aux mesures de soutien

- Indicateurs de rendement
- ◆ Nombre de communautés dans lesquelles il existe des programmes (Pourcentage des communautés dans lesquelles il existe des programmes)
 - ◆ Nombre et type de participants aux programmes, selon le type de programme
 - ◆ Nombre d'établissements de santé de communauté selon le type

2006-2007*	2007-2008*	2008-2009*
Dépenses	Dépenses	Dépenses
139,1	130,7	133,3
Dépenses salariales	Dépenses salariales	Dépenses salariales
5,8	4,3	4,4

* En fonction de l'architecture de l'activité de programme, avec les ajustements pour les présentations au Conseil du Trésor. Nous avons présumé qu'aucune croissance ne serait appliquée au nouveau financement et au financement ne faisant pas partie d'une enveloppe. Nous avons également présumé qu'une croissance de 3 % serait applicable à l'enveloppe budgétaire. Seulement les dépenses salariales sont présentées étant donné que les renseignements sur le nombre d'ETP ne sont pas disponibles à ce niveau.

** Les montants sont en millions de dollars

Programmes de prévention des maladies chroniques et des blessures

Description : Ces programmes appuient l'élaboration et la mise en œuvre d'activités communautaires qui font la promotion de choix de modes de vie sains et qui appuient les modes de vie sains et l'activité physique. À long terme, ces programmes contribueront à la prévention des maladies chroniques et des blessures au sein des communautés des Premières nations et des Inuits au Canada. Ces programmes comprennent : l'initiative sur le diabète chez les Autochtones, le programme de promotion de la nutrition et de l'activité physique et le programme de prévention des blessures.

Résultats escomptés

Amélioration du continuum des programmes et des mesures de soutien dans les communautés des Premières nations et des Inuits

- Indicateurs de rendement
- ◆ Nombre et pourcentage de communautés dans lesquelles il existe des programmes

2006-2007*	2007-2008*	2008-2009*
Dépenses	Dépenses	Dépenses
34,9	45,1	50,1
Dépenses salariales	Dépenses salariales	Dépenses salariales
2,8	2,8	2,8

* En fonction de l'architecture de l'activité de programme, avec les ajustements pour les présentations au Conseil du Trésor. Nous avons présumé qu'aucune croissance ne serait appliquée au nouveau financement et au financement ne faisant pas partie d'une enveloppe. Nous avons également présumé qu'une croissance de 3 % serait applicable à l'enveloppe budgétaire. Seulement les dépenses salariales sont présentées étant donné que les renseignements sur le nombre d'ETP ne sont pas disponibles à ce niveau.

** Les montants sont en millions de dollars

Programmes et services clés

Les domaines des six principaux programmes pour lesquels Santé Canada est déterminé à poursuivre son engagement au cours de la période 2006-2007 sont décrits ainsi : les enfants et les jeunes, la santé mentale et la lutte contre les toxicomanies, la

prévention des maladies chroniques et des blessures, la santé environnementale et la recherche, la lutte contre les maladies transmissibles et les soins de santé primaires que Santé Canada.

Programmes pour les enfants et les jeunes

Description : Ces programmes sont conçus pour améliorer, sur le plan collectif, la croissance et le développement culturel, émotionnel, intellectuel et physique des nourrissons, des enfants et des jeunes des Premières nations et des Inuits. Les programmes qui ciblent la santé des mères, des nourrissons et des enfants, qui permettent d'accroître les connaissances qu'ont les enfants de la langue et de la culture, et qui permettent d'améliorer l'état de préparation des enfants à l'école sont les principales priorités en matière de programmes du Ministère pour les enfants et les jeunes. Ces programmes comprennent : le Programme d'aide préscolaire aux Autochtones habitant dans les réserves, le Programme canadien de nutrition prénatale, le Programme de lutte contre l'ensemble des troubles causés par l'alcoolisation foetale et le Programme de santé maternelle et de l'enfant.

Résultats escomptés

Amélioration du continuum des programmes et des mesures de soutien dans les communautés des Premières nations et des Inuits
 Accroissement de la participation des personnes, des familles et des communautés des Premières nations et des Inuits aux programmes et aux mesures de soutien

- ◆ Nombre et pourcentage de communautés dans lesquelles il existe des programmes
- ◆ Nombre et type de participants aux programmes, selon le type de programme

Indicateurs de rendement

2006-2007*		2007-2008*		2008-2009*	
Dépenses	102,2	Dépenses	109,8	Dépenses	115,7
Dépenses salariales	6,1	Dépenses salariales	6,1	Dépenses salariales	6,1

* En fonction de l'architecture de l'activité de programme, avec les ajustements pour les présentations au Conseil du Trésor. Nous avons présumé qu'aucune croissance ne serait appliquée au nouveau financement et au financement ne faisant pas partie d'une enveloppe. Nous avons également présumé qu'une croissance de 3 % serait applicable à l'enveloppe budgétaire. Seulement les dépenses salariales sont présentées étant donné que les renseignements sur le nombre d'ETP ne sont pas disponibles à ce niveau.

** Les montants sont en millions de dollars

Résultats escomptés		Des programmes communautaires renforcés, une meilleure protection de la santé, des soins de santé primaires améliorés et l'accès à des services de santé non assurés contribuent à améliorer l'état de santé des personnes, des familles et des communautés des Premières nations et des Inuits
Indicateurs de rendement		<ul style="list-style-type: none">◆ Espérance de vie (à la naissance, dans les réserves et hors des réserves)◆ Taux de mortalité infantile◆ Poids à la naissance◆ Taux d'utilisation des SSNA par les clients

Stratégie de mesure du rendement

Une liste d'indicateurs et de résultats escomptés a été dressée pour le programme de santé des Premières nations et des Inuits afin d'évaluer les progrès réalisés en vue du succès du résultat

Améliorer la responsabilité et la mesure du rendement
Santé Canada a élaboré une stratégie visant à assurer le suivi et la mesure des progrès, ainsi que la préparation de rapports sur le rendement des programmes. Cela comprend l'établissement de

des Premières nations et des partenaires fédéraux comme Affaires indiennes et du Nord canadien. Santé Canada participe aussi activement à l'élaboration de programmes d'éducation et de sensibilisation communautaires au sujet des questions relatives à la qualité de l'eau potable.

Dans la région de la Colombie-Britannique, la DGSPNI étendra et accélérera le Programme sur la qualité de l'eau potable. Ce dernier sera axé sur le renforcement des capacités des membres de la collectivité chargés de la qualité de l'eau et la formation menant à leur accréditation ainsi que sur l'amélioration des volets suivants : surveillance, analyse de la qualité de l'eau et gestion des données. Voici les objectifs du programme : augmentation du nombre d'opérateurs formés et accrédités chargés de la qualité de l'eau; programmes communautaires d'analyse de l'eau conformes aux lignes directrices nationales; système de rapport uniforme, précis et rapide sur la qualité de l'eau.

stratégies de mesure du rendement en consultation avec les organisations fournissant les services dans les communautés.

Le Ministère s'efforcera d'améliorer le suivi de la santé et l'analyse des renseignements, y compris le développement des données, l'analyse des données et les données de recherche, afin d'appuyer l'établissement des priorités et la prise de décisions concernant les investissements dans le domaine de la santé. L'initiative sur le diabète chez les Autochtones, par exemple, se verra ainsi améliorée : Santé Canada commencera à appuyer l'élaboration d'un programme de recherche sur le diabète axé sur les Autochtones et accroîtra ses activités de surveillance en vue de déterminer les priorités de recherche qui permettront d'orienter les futurs programmes axés sur le diabète.

Santé Canada tire aussi profit des renseignements issus des évaluations et des études au sujet des secteurs à améliorer. En 2006-2007, Santé Canada réalisera une évaluation conjointe avec Affaires indiennes et du Nord canadien sur la Stratégie de gestion de l'eau des Premières nations. Le Ministère élaborera aussi des processus et des outils, et recueillera des renseignements pour évaluer les programmes de soins de santé primaires, d'immunisation et de santé mentale, et achèvera l'évaluation du programme de soins à domicile et en milieu communautaire.

ses programmes afin de pouvoir mieux satisfaire les besoins variés des communautés autochtones.

De plus, nous poursuivrons la mise en œuvre de la Stratégie nationale de prévention du suicide chez les jeunes Autochtones. Cette nouvelle stratégie permettra d'établir des projets dans un nombre ciblé de communautés autochtones, où elle portera principalement sur l'établissement d'un solide fondement pour des approches efficaces de prévention du suicide chez les jeunes. Les activités appuyées par la Stratégie comprendront la formation axée sur les compétences, l'élaboration d'outils et de ressources, et des initiatives de prévention primaire et de sensibilisation qui assurent la promotion du bien-être mental et de la résilience des jeunes. La Stratégie permettra aussi d'élaborer des protocoles régionaux visant à aider les communautés en cas de crise et à appuyer divers projets de recherche. Outre ces nouvelles activités, Santé Canada continuera d'offrir, en 2006-2007, un continuum de services en santé mentale et de soutien affectif aux anciens pensionnaires et à leur famille dans le cadre des efforts renouvelés du gouvernement canadien quant au règlement rapide des réclamations fondées en droit relatives aux pensionnats indiens.

Santé Canada continuera de déployer des efforts afin de remédier aux taux élevés de maladies chroniques dans les communautés autochtones. Plus précisément, le Ministère améliorera l'initiative sur le diabète chez les Autochtones en accroissant le niveau de financement communautaire auquel les communautés ont accès afin d'élargir la portée des activités de promotion, de prévention et de soins. Au-delà des efforts déployés par le Ministère pour traiter le diabète, nous élaborerons un plan stratégique de prévention des maladies chroniques chez les Premières nations et les Inuits, en partenariat avec les intervenants et les experts clés. Ce plan contribuera à l'élaboration des futures approches de prévention des maladies chroniques.

En raison des responsabilités fédérales qui consistent à protéger les communautés des Premières nations contre les risques pour la santé liés aux maladies

transmissibles, Santé Canada commencera à mettre en œuvre des plans d'urgence en cas de maladies transmissibles. Santé Canada déploiera des efforts en particulier pour renforcer la capacité de planification et d'intervention en cas d'urgence aux échelons régional et communautaire, renforcer les relations de collaboration avec les provinces, les territoires et les intervenants, et faire en sorte qu'en cas d'urgence, les fournitures soient acquises et fournies rapidement aux communautés des Premières nations et des Inuits. Le Ministère élaborera et mettra à l'essai des plans de lutte contre la grippe pandémique dans les communautés des Premières nations et des Inuits d'ici à la fin de l'exercice 2006-2007.

Le Secréariat du Nord de Santé Canada, en partenariat avec le gouvernement du Nunavut et la Nunavut Tunngavik Incorporated (NTI), s'inspirera du projet d'intégration de la santé 2005-2006 du Nunavut pour améliorer l'intégration des programmes de promotion de la santé du territoire et du gouvernement fédéral à l'échelon communautaire et territoriale et créer des initiatives pour inciter la communauté à participer à la planification et à l'exécution des programmes de mieux-être. Ce partenariat respecte également l'intention du chapitre 32 de l'Accord sur les revendications territoriales du Nunavut qui prévoit la participation des Inuits à l'élaboration, à la conception et à l'exécution des programmes.

Enfin, dans le cadre de la Stratégie de gestion de l'eau, Santé Canada travaillera en partenariat avec les communautés des Premières nations, à l'exception de celles du Yukon et des Territoires du Nord-Ouest, afin de mettre en œuvre des mesures de surveillance de l'eau potable, conformément aux *Recommandations pour la qualité de l'eau potable au Canada*. Cela nécessitera l'élaboration d'options et d'un plan d'action visant la mise en œuvre d'un régime de réglementation de l'eau potable dans les communautés des Premières nations. Santé Canada fera enquête sur les problèmes potentiels liés à la qualité de l'eau et formulera des conseils et des recommandations à l'intention des communautés

de santé et aux communautés autochtones de concevoir de nouvelles façons d'intégrer et d'adapter les services de santé existants. Une attention sera aussi accordée à la mise en œuvre des pratiques exemplaires et des leçons issues d'une série de projets pilotes dans le cadre de l'initiative d'intégration de la santé.

Santé Canada continuera de financer l'initiative relative aux ressources humaines en santé autochtones afin d'accroître à long terme l'effectif de professionnels de la santé issus des Premières nations ou d'origine inuite ou métisse. Dans le cas des jeunes Autochtones, les étudiants qui poursuivront des études postsecondaires dans le domaine du soutien en santé pourront être admissibles à des fonds et des bourses d'études. Afin de relever le défi omniprésent consistant à recruter et à maintenir en poste le personnel infirmier à l'appui des services de santé dans les communautés, nous offrons des occasions de perfectionnement professionnel et de formation continue. En partenariat avec l'Association des infirmières et infirmiers du Canada, Santé Canada lancera un portail national des soins infirmiers afin de fournir un soutien essentiel au personnel infirmier qui travaille en milieu rural et éloigné.

Santé Canada continuera aussi d'appuyer l'élaboration et la mise en œuvre d'activités de reconnaissance professionnelle et d'amélioration de la qualité chez les Premières nations et les Inuits. Cela permettra d'accroître le nombre de services de soins de santé reconnus dans les communautés des Premières nations et de s'assurer que les soins de santé fournis sont adaptés aux besoins des communautés. Nous continuerons aussi de mettre en œuvre, dans des communautés choisies, l'initiative en santé bucco-dentaire pour les enfants afin d'améliorer la santé bucco-dentaire des enfants des Premières nations. Cela permettra de concentrer les efforts sur la sensibilisation aux soins bucco-dentaires de prévention et sur les pratiques positives de soins personnels pour les parents et les aidants naturels, et de renforcer la capacité des communautés d'exécuter et de maintenir des initiatives liées à la santé bucco-dentaire.

des maladies

Promouvoir les modes de vie sains et la prévention

Enfin, Santé Canada appuie la construction, l'exploitation, l'entretien et la gestion du milieu d'établissements de santé et de résidences pour le personnel dans les réserves. En 2006-2007, quinze établissements de santé seront construits ou agrandis, et les projets de recapitalisation (réparations, remplacements, améliorations) permettront d'améliorer le milieu de travail pour les clients et le personnel, de même que d'améliorer la qualité des services de santé offerts dans les communautés. En 2006-2007, Santé Canada investira aussi 1,2 million de dollars dans l'évaluation et l'assainissement de l'environnement pour faire en sorte que les établissements de santé dans les communautés des Premières nations respectent les normes et les exigences environnementales, et se conforment aux engagements du Ministère en matière de développement durable.

Cette priorité met l'accent sur la santé maternelle et infantile, la santé mentale, la prévention du suicide, la prévention des maladies chroniques, la préparation en cas de maladies transmissibles et l'eau potable. Des initiatives ont été mises en place, comme le Programme de santé maternelle et infantile, en vue d'élargir et d'améliorer le continuum des services fournis et d'améliorer les résultats pour la santé et la vie sociale des femmes enceintes et des familles s'occupant de nourrissons et de jeunes enfants dans un nombre ciblé de communautés des Premières nations et des Inuits. Par ailleurs, Santé Canada continuera, en 2006-2007, d'accroître le nombre de lieux et de places disponibles pour les enfants participant au Programme d'aide préscolaire aux Autochtones des réserves (PAPAR) et fournira de la formation aux travailleurs du Programme.

En 2006-2007, Santé Canada supervisera l'élaboration d'un plan d'action stratégique visant à améliorer les résultats en bien-être mental pour les Premières nations et les Inuits. Le plan d'action permettra, entre autres, d'orienter les efforts déployés par le Ministère en vue de mieux situer

l'importance des déterminants de la santé que sont, par exemple, l'éducation et le revenu familial dans l'amélioration des résultats en matière de santé, ainsi que de la nécessité d'innover dans le domaine de la santé. Ces priorités seront aussi réorientées à la suite d'un examen gouvernemental des engagements relatifs à la santé pris au cours de la Réunion des premiers ministres et des dirigeants autochtones en 2005.

Poursuivre la prestation des programmes et des services liés à la santé

Santé Canada fournit aux Premières nations et aux Inuits une gamme de programmes et de services de santé, qui se poursuivront en 2006-2007. En partenariat avec les Premières nations et les Inuits, nous continuerons à fournir des services de soins de santé primaires dans environ 200 communautés éloignées, grâce à environ 600 personnes du personnel infirmier travaillant dans des postes de soins infirmiers et dans des centres de santé communautaires dans les communautés éloignées ou isolées. Par l'entremise de ses bureaux régionaux, nous exécutons aussi des programmes visant les enfants et les jeunes, et portant sur la santé mentale et les toxicomanies, les maladies chroniques et la santé environnementale, de même que sur la prévention des maladies transmissibles et des maladies non transmissibles. Ces services s'ajoutent aux services offerts par les autorités provinciales, territoriales et régionales de la santé.

Le remboursement, par le programme des Services de santé non assurés (SSNA), des médicaments, des soins dentaires, des soins de la vue, des fournitures médicales et d'équipement médical, des services liés aux interventions d'urgence en services de santé mentale ainsi que du transport pour raison médicale, sera encore offert aux 765 000 Indiens inscrits et aux Inuits reconnus du Canada, sans égard au lieu de résidence.

Santé Canada travaille en étroite collaboration avec ses partenaires du milieu de la santé et avec d'autres ministères fédéraux. Il appuie l'Agence de santé publique du Canada, qui assure la prestation des programmes visant les enfants et les jeunes, comme le Programme d'aide préscolaire aux Autochtones

dans les communautés urbaines et du Nord, de même que des programmes pancanadiens qui sont offerts aux populations autochtones. Nous travaillons aussi en étroite collaboration avec les représentants de la Stratégie de gestion de l'eau d'Affaires indiennes et du Nord canadien pour faire en sorte que toutes les communautés des Premières nations au Canada aient accès à un approvisionnement sans danger et fiable en eau.

Améliorer la qualité des programmes et des services liés à la santé et l'accès à ceux-ci

Les éléments clés de cette priorité sont les suivants : travailler à l'intégration uniforme des services, accroître le nombre de professionnels de la santé d'origine autochtone, appuyer l'agrement, renforcer les capacités communautaires en matière de soins dentaires, améliorer les immobilisations et y investir. Nous travaillons à faire progresser une meilleure intégration des programmes et services de santé fédéraux, provinciaux et territoriaux destinés aux Premières nations et aux Inuits, et à veiller à ce que ces services répondent aux besoins des peuples autochtones. Cela comprendra la mise en œuvre du Fonds de transition pour la santé des Autochtones, qui vise à permettre aux gouvernements fédéral, provinciaux et territoriaux, aux gouvernements des Premières nations qui fournissent des services de soins

Santé Canada de la région de l'Atlantique vient en aide aux collectivités innues du Labrador pour renforcer leur capacité de gestion et de contrôle des programmes de santé. Dans l'espoir d'améliorer les services de santé offerts dans les collectivités et de réduire les injustices sur le plan de la santé, le personnel de Santé Canada au Labrador collabore avec la Première nation innue de Mushuan en vue d'établir un pavillon de ressourcement et un centre de mieux-être ainsi qu'avec la Première nation innue de Sheshatshiu en vue de créer une enquête sur la santé des collectivités et d'élaborer un plan de formation pour le personnel chargé du traitement des dépendances.

RÉSULTAT STRATÉGIQUE :
De meilleurs résultats de santé et réduction des
inégalités en santé entre les Premières nations et
Inuits et les autres Canadiens

Activité de programme – Santé des Premières nations et des Inuits

Cette activité de programme contribue au résultat stratégique du gouvernement du Canada « Des Canadiens en santé ayant accès à des soins de santé de qualité ».

DÉPENSES PRÉVUES ET ÉQUIVALENTS TEMPS PLEIN (ETP)				
	Prévision des dépenses	Dépenses prévues	Dépenses prévues	Dépenses prévues
(millions de dollars)	2005-2006	2006-2007	2007-2008	2008-2009

Dépenses brutes	1 930,8	2 124,6	2 139,7	2 159,2
Moins : Revenus disponibles prévus	3,4	5,5	5,5	5,5
Dépenses nettes	1 927,5	2 119,1	2 134,2	2 153,7
ETP	2 722	2 884	2 883	2 857

Remarques : L'augmentation des dépenses de 2005-2006 à 2006-2007 est principalement due à la croissance annuelle de l'enveloppe budgétaire des Autochtones et à une augmentation du niveau de financement pour le suivi de la réunion spéciale des premiers ministres et des dirigeants autochtones (le 12 septembre 2004). Cette augmentation est contrebalancée en partie par la réduction exigée par le Comité d'examen des dépenses (CED).

L'augmentation des dépenses de 2006-2007 à 2007-2008 est principalement due à la croissance annuelle de l'enveloppe budgétaire des Autochtones et à une augmentation du niveau de financement pour le suivi de la réunion spéciale des premiers ministres et des dirigeants autochtones (le 12 septembre 2004). Cette augmentation est contrebalancée en partie par la réduction exigée par le Comité d'examen des dépenses (CED).

L'augmentation des dépenses de 2007-2008 à 2008-2009 est principalement due à la croissance annuelle de l'enveloppe budgétaire des Autochtones. Cette augmentation est contrebalancée en partie par une réduction des fonds pour la temporisation de la mise en œuvre du Système de Gestion de l'eau des Premières nations.

Le changement sur le plan des ETP est dû à l'augmentation dans le poste des salaires du budget de fonctionnement.

Les chiffres comprennent un montant pour d'autres coûts d'infrastructure ministérielle et régionale appuyant l'exécution des programmes.

Description de l'activité de programme

Les objectifs de l'activité de programme de la santé des Premières nations et des Inuits de Santé Canada sont d'améliorer les résultats de santé, d'assurer la disponibilité des services de santé de qualité et l'accès à ceux-ci et de favoriser une plus grande prise en charge du système de santé par les Premières nations et les Inuits.

Pour atteindre ces objectifs, le Ministère doit faire face à de nombreux défis similaires à ceux des autres systèmes de santé du Canada, comme l'augmentation des coûts, le manque de ressources humaines en santé et le vieillissement de la population. Le système

de santé des Premières nations et des Inuits représente d'autres défis, causés par l'accroissement rapide d'une population dans laquelle le taux moyen de blessures et de maladies est plus élevé que la moyenne nationale, et le fait que la population habite principalement dans des régions éloignées et rurales.

Dans ce contexte, Santé Canada va se concentrer dans quatre secteurs clés en 2006-2007 : poursuivre la prestation des programmes et des services liés à la santé; améliorer la qualité des programmes et des services liés à la santé et l'accès à ceux-ci; promouvoir les modes de vie sains et la prévention des maladies; améliorer la responsabilisation et la mesure du rendement. Ces priorités tiennent compte de

Résultats prévus Indicateurs de rendement

Accès à des pesticides plus sécuritaires	◆ Nombre de nouvelles matières actives à risque réduit disponibles au Canada
	◆ Pourcentage de produits chimiques à risque réduit et des matières actives biopesticides homologués ou en attente d'homologation aux États-Unis qui sont aussi homologués ou en attente d'homologation au Canada
	◆ Nombre de nouvelles matières actives homologuées grâce à l'examen conjoint entre l'ARLA et la USEPA ou au programme de travail partagé
	◆ Nombre de matières actives soumises à une ré-évaluation
Renforcement de la conformité à la LPA et son Règlement	◆ Rétroaction du public et des intervenants
Utilisateurs informés des pratiques à risques réduits	◆ Nombre de propositions et de décisions réglementaires définitives affichées dans le site Web
Transparence de la réglementation des pesticides	◆ Création de salles de lecture, signallement des effets nocifs
	◆ Les gains d'efficacité obtenus grâce au processus électronique et à l'harmonisation permettent l'intégration de nouvelles politiques et méthodes scientifiques
Amélioration des gains d'efficacité réglementaires et de la rentabilité	◆ Rétroaction du public et des intervenants
	◆ Nombre d'appels de fichiers
Public et intervenants informés	◆ Nombre de réponses au public par le Service de renseignements sur la lutte antiparasitaire

Liens internet

Page d'accueil de l'Agence de réglementation de la lutte antiparasitaire (ARLA) :

www.pmr-arla.gc.ca

Plan stratégique 2003-2008 de l'ARLA :

www.pmr-arla.gc.ca/trancais/pdf/plansandreports/pmr-strategioplan2003-2008-f.pdf

pesticides (PNSCP). Le PNSCP comprend des programmes visant les questions et les problèmes relatifs à la surveillance de la conformité et à l'application de la Loi aux plans régional, multirégional et national. Une grande partie de ce travail est accompli grâce à un réseau régional d'agents désignés chargés d'inspecter les fabricants, les distributeurs et les utilisateurs de pesticides et de procéder à des enquêtes à leur sujet. À titre d'exemple d'activité de vérification de la conformité, mentionnons la surveillance des pesticides utilisés pour la culture du raisin et du bleuet qui sera effectuée cette année. D'autres pesticides seront surveillés au fur et à mesure que des problèmes surviendront.

De plus, nous continuerons de travailler en partenariat avec les autres autorités de réglementation fédérales ainsi qu'avec celles des provinces, et nous explorerons d'autres possibilités de collaboration avec des organisations internationales. Plus particulièrement en 2006-2007, Santé Canada compte poursuivre l'élaboration d'indicateurs de rendement relatifs à la conformité en participant à un colloque de l'OCDE sur le sujet.

5. La réduction des risques liés aux pesticides

en agriculture

Le Programme de réduction des risques liés aux pesticides appuie les objectifs de la nouvelle Loi sur les produits antiparasitaires, c'est-à-dire faciliter l'accès à des produits à risque réduit et améliorer la durabilité en agriculture. Fondé sur

la participation des producteurs et axé sur les données, ce programme est facilité conjointement par la Section de la lutte antiparasitaire durable de l'Agence de réglementation de la lutte antiparasitaire et par le Centre pour la lutte antiparasitaire d'Agriculture et Agroalimentaire Canada (AAC). L'objectif du programme est d'améliorer la durabilité des produits agricoles canadiens par l'élaboration et la mise en œuvre de stratégies de réduction des risques fondées sur les données. Les bénéfices résultant de ce programme comprendront l'élaboration et l'adoption de pratiques de lutte antiparasitaire de recherche grâce à la recherche appliquée sur les outils de rechange présentant moins de risques et les biopesticides.

AAC et Santé Canada continueront de travailler avec les intervenants en vue d'élaborer des stratégies sur des pesticides propres à certaines denrées visant vingt cultures prioritaires dont les pommes, les pommes de terre, les haricots secs et les légumes de serre. La participation active des intervenants dans la création et la mise en œuvre des stratégies est essentielle au succès du programme.

chimiques, la transparence à l'égard du public en ce qui a trait au fondement des décisions réglementaires et l'inclusion dans la législation du programme d'examen spécial afin de régler les problèmes potentiels particuliers décelés en ce qui a trait aux produits homologués.

En vue d'appuyer le besoin de fournir aux Canadiens un processus réglementaire transparent et participatif, nous transformerons notre mode de relation d'affaires et nos pratiques de diffusion de l'information en pratiques interactives offertes sur le Web. Cette transformation permettra de fournir, d'entreposer, de récupérer, de communiquer et d'utiliser l'information et d'y accéder de façon plus efficace et efficiente et se traduira par une gestion plus efficace et rentable du processus réglementaire.

2. L'homologation des nouveaux produits antiparasitaires

Avant qu'un nouveau pesticide ne soit commercialisé, Santé Canada procède à une évaluation approfondie du produit afin de s'assurer que son usage n'entraîne aucun risque inacceptable. Cela comprend une évaluation des risques pour la santé humaine (y compris l'exposition professionnelle et occasionnelle), des résidus dans les aliments, des risques environnementaux (y compris le devenir des produits dans l'environnement et leurs effets potentiels sur la faune), ainsi que de leur efficacité. Pour effectuer les évaluations, il faut utiliser les méthodes scientifiques disponibles les plus modernes et qui savent satisfaire aux pratiques exemplaires internationales. Veillant à maintenir à jour de façon continue ses méthodes d'évaluation, nous participons à un programme d'examen conjoint avec les États-Unis par l'entremise de l'ALENA, programme qui s'étend à l'échelle mondiale grâce à l'Organisation de coopération et de développement économiques (OCDE). Cela permet également d'atteindre l'objectif de délivrer des homologations en temps opportun. En effet, l'harmonisation et les efforts communs qui permettent d'évaluer les risques liés aux pesticides

3. L'évaluation des produits antiparasitaires homologués

sont efficaces et bénéficient des meilleures approches scientifiques disponibles au plan international. La consultation publique continuera d'être utilisée couramment dans le cadre de l'élaboration d'importantes politiques scientifiques et de la prise de décisions liées à l'homologation.

Nous ré-évaluons les anciens pesticides actuellement sur le marché afin de déterminer si leur usage continu demeure acceptable compte tenu des données récentes et des approches scientifiques actuelles. Nous avons entrepris une importante consultation publique sur des propositions d'évaluation et de gestion du risque en vue de faire participer les divers intervenants, dont les titulaires d'homologation, les autres ministères, les agriculteurs et leurs associations ainsi que les autres organisations non gouvernementales et le grand public.

4. Le Programme national de surveillance de la conformité des pesticides

Nous avons la responsabilité permanente de contribuer à la protection de la santé des Canadiens et de leur environnement en facilitant, en encourageant et en maximisant le respect de la LPA et de son règlement. Lorsque nous constatons le non-respect de la Loi, nous appliquons les mesures appropriées, p. ex. formation, amendes ou poursuites. Santé Canada préconise et surveille le respect de la Loi et du Règlement, principalement par l'entremise du Programme national de surveillance de la conformité des

pratiques de réduction des risques, sur les solutions de rechange aux produits antiparasitaires et sur les pesticides à usage limité. Cela permet également à nos partenaires d'établir des liens valables entre leurs résultats de recherche et les décisions réglementaires, et par conséquent, d'améliorer notre processus de prise de décisions réglementaires sur les pesticides.

Les groupes consultatifs jouent un rôle important dans la prise de décisions à Santé Canada. Le Conseil consultatif sur la lutte antiparasitaire du ministre favorise le dialogue entre les intervenants et Santé Canada. Le Comité consultatif de gestion économique offre des conseils stratégiques sur la manière d'améliorer l'efficacité et la rentabilité, et le Comité fédéral-provincial-territorial sur la lutte antiparasitaire et les pesticides contribue à améliorer les relations fédérales-provinciales-territoriales en ce qui a trait à la lutte antiparasitaire et aux pesticides. De plus, ce comité conseille et oriente les gouvernements fédéral, provinciaux et territoriaux sur les programmes, les politiques et les enjeux.

Le plus grand défi auquel les ressources humaines doivent faire face en ce qui concerne cette activité de programme consiste à maintenir le rythme croissant des connaissances scientifiques et de l'innovation dans l'industrie. Nous devons poursuivre le recrutement de nouvelles ressources possédant les connaissances de base appropriées, et développer et former notre personnel dans divers domaines scientifiques.

Cette activité de programme comprend trois principaux objectifs : la protection de la santé et de l'environnement, l'augmentation de l'utilisation de pratiques et de produits antiparasitaires à risque réduit et l'amélioration de la confiance du public et des intervenants dans la réglementation des pesticides. Pour atteindre ces objectifs, nous nous concentrons sur cinq activités principales répondant à de nombreux défis auxquels fait face Santé Canada, tels que les demandes des consommateurs, la

mondialisation et les changements scientifiques et technologiques rapides. Ces activités sont :

1. L'amélioration de la réglementation

La nouvelle *Loi sur les produits antiparasitaires (LPA)*, qui est entrée en vigueur le 28 juin 2006, renforcera la protection de la santé et de l'environnement en inscrivant dans la législation les méthodes modernes d'évaluation des risques ainsi que les approches de gestion du risque actuellement utilisées pour des questions de politique. Celles-ci comprennent une protection particulière des nourrissons et des enfants, la prise en compte de l'exposition à diverses sources de pesticides, y compris les aliments et l'eau, et la prise en compte des effets cumulatifs des pesticides qui agissent de la même façon. Cette loi continuera d'appuyer la réduction des risques liés aux pesticides en s'assurant à ce que seuls les produits qui sont vraiment efficaces soient homologués et en accélérant l'homologation des produits à faible risque. Le système d'homologation deviendra plus transparent en créant un registre public permettant l'accès aux données d'essai et aux rapports d'évaluation détaillés portant sur les pesticides homologués. Santé Canada continuera de partager les résultats scientifiques sur les pesticides aux autorités de réglementation provinciales, territoriales et internationales afin d'améliorer le processus des examens conjoints internationaux des pesticides et fera part des pratiques durables de lutte antiparasitaire aux provinces et aux territoires afin d'améliorer l'industrie agroalimentaire. Cela permettra aux agriculteurs canadiens d'avoir un meilleur accès aux pesticides plus récents et sans danger, ce qui améliorera leur compétitivité sur le marché.

De plus, la nouvelle *LPA* renforcera les contrôles après homologation pour l'ensemble des produits. Elle prévoit notamment la déclaration des effets nocifs des pesticides par les fabricants, la ré-évaluation régulière des anciens produits

Activité de programme – Règlement sur les produits antiparasitaires

Cette activité de programme contribue au résultat stratégique du gouvernement du Canada « Des Canadiens en santé ayant accès à des soins de santé de qualité ».

DÉPENSES PRÉVUES ET ÉQUIVALENTS TEMPS PLEIN (ETP)				
	Prévision	Dépenses	Dépenses	Dépenses
(millions de dollars)	2005-2006	2006-2007	2007-2008	2008-2009
	des dépenses	prévues	prévues	prévues

Dépenses brutes	60,5	58,6	58,2	54,1
Moins : Revenus disponibles prévus	5,9	7,0	7,0	7,0
Dépenses nettes	54,6	51,6	51,2	47,1
ETP	675	652	656	604

Remarques : La diminution des dépenses de 2005-2006 à 2006-2007 est principalement due au changement à un financement unique du système de réglementation des produits de lutte antiparasitaire et à la réduction exigée par le Comité d'examen des dépenses (CED). La baisse des dépenses de 2006-2007 à 2008-2009 est principalement due à une réduction du niveau de financement de l'initiative visant à créer un sentiment de confiance chez le public et les intervenants vis-à-vis de la réglementation des pesticides.

Les chiffres comprennent un montant pour d'autres coûts d'infrastructure ministérielle et régionale appuyant l'exécution des programmes.

Description de l'activité de programme

L'activité de programme de Santé Canada, *Règlement sur les produits antiparasitaires*, protège la santé humaine et l'environnement en réduisant les risques associés aux pesticides importés, vendus ou utilisés au Canada. L'activité est renforcée par l'utilisation de principes scientifiques solides et progressifs, de méthodes modernes d'évaluation des risques et d'approches de gestion du risque ainsi que d'approches novatrices de lutte antiparasitaire durable.

La science constitue le fondement des activités de Santé Canada liées au *Règlement sur les produits antiparasitaires*. Nous évaluons les risques pour la santé humaine et pour l'environnement qu'entraîne l'exposition aux pesticides chimiques et biologiques ainsi que l'efficacité de ces produits. En appui à ce travail, nous élaborons des méthodes d'évaluation, des protocoles d'essai des pesticides, des stratégies de réduction des risques et des outils de gestion du risque. Nos domaines d'expertise scientifique sont les suivants : la toxicologie, la toxicologie environnementale, la chimie analytique, le devenir des produits chimiques dans l'environnement, la biochimie, l'endocrinologie, l'écologie, la phytotechnie,

La phytopathologie, l'entomologie, l'évaluation de l'exposition professionnelle et occasionnelle, ainsi que l'évaluation globale et cumulative.

Afin de satisfaire au premier objectif de cette activité de programme, qui est de « protéger la santé humaine et l'environnement contre les risques inacceptables associés aux produits antiparasitaires », nous collaborons avec des spécialistes de divers domaines du portefeuille de la Santé ainsi qu'avec les cinq ministères responsables des ressources naturelles. Nous travaillons également avec l'Agence canadienne d'inspection des aliments et les gouvernements provinciaux relativement à des activités de vérification de la conformité à la loi, avec Agriculture et Agroalimentaire Canada (AAC) en vue d'élaborer des stratégies de réduction des risques et d'améliorer l'accès à des produits antiparasitaires spécialisés, et avec un groupe de travail interministériel fédéral sur la recherche sur les pesticides et le contrôle de ces derniers. Notre participation à ce groupe de travail nous permet de discuter de nos besoins de recherche et de contrôle, d'obtenir de l'information sur les niveaux de pesticides présents dans l'environnement, sur leurs effets sur la santé humaine et l'environnement, sur les protocoles d'essai, sur les

Réduire l'offre et la demande de drogues par l'entremise de programmes de prévention, de réduction des méfaits, de traitement et d'application des lois

www.hc-sc.gc.ca/ahc-asc/activ/strateg/drugs-droguess/index_f.html

Cadre national d'action sur l'usage et l'abus de substances contrôlées

www.hc-sc.gc.ca/ahc-asc/activ/strateg/drugs-droguess/nfa-can/index_f.html

Programme national de recherche

www.hc-sc.gc.ca/ahc-asc/activ/strateg/drugs-droguess/nat-res-rech/index_f.html

* D'autres programmes et services qui contribuent à cette activité de programme représentent 52,5 millions de dollars pour 2006-2007.

Fonds des initiatives communautaires de la Stratégie antidrogue (FICSA)

www.hc-sc.gc.ca/dhp-mps/substan/fond-comm-fund/index_f.html

Publications de la Stratégie canadienne antidrogue

www.hc-sc.gc.ca/ahc-asc/pubs/drugs-droguess/index_f.html

Santé au travail :

www.hc-sc.gc.ca/ahc-asc/branch-dirgen/hecs-dgesec/whpsp-psstsp/index_f.html

Principales initiatives

Étant donné l'apparition de nouvelles menaces pour la santé, Santé Canada travaille en collaboration avec l'Agence de santé publique du Canada (ASPC), Sécurité publique et Protection civile Canada et d'autres organismes en vue de la préparation et de la planification de mesures et d'interventions d'urgence physiques et psychosociales afin de réagir à des urgences sanitaires nationales, comme une pandémie, un acte terroriste ou des activités terroristes présumées. Santé Canada appuiera les ministères et les organismes dans leurs mesures et leurs interventions d'urgence en fournissant des conseils, des directives, de la formation, des examens de santé et en prenant des mesures de prophylaxie et de vaccination et continuera d'appuyer l'ASPC avec des services de quarantaine environnementaux. Le Ministère offre également des services psychosociaux afin d'aider les intervenants d'urgence et les employés de l'État qui fournissent les services essentiels pendant et immédiatement après des incidents critiques.

Le Ministère élaborera des approches permettant de mieux définir et gérer les problèmes de santé mentale et de toxicomanie en milieu de travail. Les secteurs d'activités viseront principalement la prévention et la réduction des troubles mentaux et des toxicomanies chez les fonctionnaires fédéraux grâce à la promotion de la santé mentale, à l'identification rapide des cas et à un aiguillage approprié; à un programme de gestion des cas d'invalidité; et à l'élaboration et à la mise en œuvre d'une stratégie fédérale complète de santé en milieu de travail.

Liens internet

- Tabac : www.hc-sc.gc.ca/hl-vs/tobac-tabac/index_f.html
- Changement climatique : www.hc-sc.gc.ca/ewh-semt/climat/index_f.html
- Air : www.hc-sc.gc.ca/ewh-semt/air/index_f.html
- Eau : www.hc-sc.gc.ca/ewh-semt/water-eau/index_f.html
- Loi canadienne sur la protection de l'environnement* : www.hc-sc.gc.ca/lyh-vsv/environ/cepa-lcpe_f.html
- Initiative sur les modes de vie sains : www.msc-smc.ec.gc.ca/education/uv/index/index_f.html
- Le système général harmonisé : www.hc-sc.gc.ca/ahc-asc/intactiv/ghs-sgh/index_f.html
- Stratégie de réduction des risques liés au plomb : hc-sc.gc.ca/ewh-semt/contaminants/lead-plomb/risk-reduction-risques_f.html
- Stratégie canadienne antidrogue www.hc-sc.gc.ca/ahc-asc/activ/strateg/drugs-drogues/index_f.html
- Règlement sur l'accès à la marijuana à des fins médicales (RAMFM) www.hc-sc.gc.ca/dhp-mps/marihuana/index_f.html
- Mise en annexe d'un certain nombre de substances contrôlées et élaboration d'autres modifications proposées au Règlement sur les précurseurs (RP) www.hc-sc.gc.ca/dhp-mps/substancontrol/index_f.html

Santé au travail et santé publique

Description : Le Programme de santé au travail et de sécurité du public (PSTSP) fournit des services de protection de la santé et de la sécurité au secteur public, aux voyageurs, aux dignitaires qui visitent le Canada et à d'autres. Il établit aussi et fait la promotion de politiques nationales sur la santé et la sécurité au travail.

Santé Canada continuera de fournir des services de santé au travail à près de 200 000 fonctionnaires fédéraux qui travaillent au Canada et à l'étranger dans environ 100 ministères et organismes. Santé Canada offre, dans le cadre d'un programme d'aide aux employés, des services sur une base de recouvrement à environ 143 des coûts d'organisations canadiennes des secteurs public et parapublic. Par l'entremise du Bureau de la santé internationale, Santé Canada fournit des services d'urgence sanitaire aux personnes jouissant d'une protection internationale et à leur famille pendant leurs séjours officiels au Canada.

La santé des personnes qui voyagent à l'intérieur du Canada est protégée grâce à des programmes d'inspections volontaires pour les transporteurs communs afin de gérer les risques associés aux aliments, à l'eau et aux mesures d'hygiène. La réglementation sur l'eau potable confère certains pouvoirs d'inspection et d'amélioration à la qualité de l'eau potable dans les transporteurs. De plus, aux termes de la *Loi sur la quarantaine* et en vertu du Règlement sanitaire international de l'OMS, les agents d'hygiène du milieu du PSTSP sont responsables d'inspecter et d'évaluer les véhicules, les marchandises et les cargaisons, et d'ordonner leur détention, leur assainissement, leur retrait ou leur destruction, s'il le faut, afin d'éviter la propagation des maladies transmissibles évitables par la mise en quarantaine.

Résultats escomptés

Fonction publique saine

Amélioration de la santé publique pour les voyageurs

- ◆ Pourcentage d'employés de la fonction publique qui demeurent au travail pendant ou après une blessure, une maladie ou un incident traumatique (Statistiques du Secrétariat du Conseil du trésor sur les congés, les aménagements et les blessures en milieu de travail)
- ◆ Clients satisfaits par les services de santé au travail et de planification d'urgence (Enquêtes sur la satisfaction de la clientèle)
- ◆ Pourcentage d'incidents d'affections gastro-intestinales sur les bateaux de croisière, avec un objectif de moins de 2 % des passagers et de l'équipage

2006-2007*

2007-2008

2008-2009

\$	ETP	\$	ETP	\$	ETP
24,5	417	24,4	418	24,5	419

* Les montants sont en millions de dollars

Principales initiatives

Le Ministère, à l'appui de l'engagement du gouvernement relié à la santé des enfants, procédera à la mise en œuvre de la Stratégie de réduction des risques liés au plomb (SRRP) pour les produits de consommation. Ces mesures protégeront l'état de santé des Canadiens en réduisant les risques pour la santé associés à l'exposition au plomb. Le plomb est dangereux pour la santé et est particulièrement dangereux pour les nourrissons et les jeunes enfants car ils sont plus vulnérables à ses effets nocifs. La SRRP propose des concentrations maximales de plomb pour quatre catégories de produits de consommation avec lesquels les enfants sont susceptibles d'être en contact. La réglementation pour chaque catégorie sera élaborée séparément, en accordant d'abord aux groupes de produits comportant le plus de risques pour les enfants. Le Ministère vérifiera également les taux de conformité pour les produits qui sont déjà réglementés pour la teneur en plomb. Le rendement sera fonction de l'élimination du marché canadien de ces produits dangereux et du degré de sensibilisation du public aux risques qu'ils comportent.

D'autres activités de réglementation et de sensibilisation permettront également d'appuyer l'engagement à l'égard de la protection de la santé des enfants. Par exemple, pour protéger l'état de santé des enfants et réduire les risques d'étranglement associés aux boucles souples employées dans la fabrication et l'utilisation des couvre-fenêtres (stores à mini-lamelles et rideaux), des règlements seront élaborés et appliqués afin d'obliger les importateurs, les annonceurs et les détaillants à respecter les règles de sécurité concernant les couvre-fenêtres à cordon. Pour gérer efficacement l'incidence continue du cancer de la peau, nous devons veiller à ce que les enfants adoptent de bonnes habitudes lorsqu'ils pratiquent des activités de plein air. Il est plus facile d'influencer ou de changer une habitude au moment de l'acquisition de celle-ci. Il s'agit de l'élément

fondamental du projet de sensibilisation aux effets du soleil (Sun Awareness Project), un programme de sensibilisation en milieu scolaire visant à renseigner les enfants et les adolescents sur les bienfaits de l'exposition au soleil et les risques associés à une exposition excessive. Ce projet comprend des éléments d'apprentissage et des exercices qui sont intégrés au programme scolaire régulier, tant au niveau élémentaire que secondaire. Au cours du Sommet mondial sur le développement durable de 2002, le Canada s'est engagé à la mise en œuvre complète, d'ici 2008, du Système général harmonisé de classification et d'étiquetage des produits chimiques (SGH). Le SGH est perçu à l'échelle mondiale comme le fondement de la saine gestion des produits chimiques, et améliore la protection de la santé des humains et de l'environnement en harmonisant la classification et la communication des risques associés aux produits chimiques à l'échelle internationale. En s'appuyant sur les consultations des intervenants sur le SGH, Santé Canada fera des progrès quant à ses modifications législatives et réglementaires nécessaires pour la mise en œuvre complète du SGH d'ici 2008.

Dans le cadre des responsabilités qu'il assume en vertu de la Loi canadienne sur la protection de l'environnement 1999 (LCPE), une priorité sera accordée pour travailler avec Environnement Canada à élaborer des modifications réglementaires pour le *Règlement sur les renseignements concernant les substances nouvelles (organismes)* qui tiennent compte des changements survenus dans les milieux de la réglementation, des politiques et des sciences, notamment la production d'animaux transgéniques, chimériques et clones (p. ex. animaux d'élevage). De plus, le Ministère travaillera à l'élaboration de règlements environnementaux appropriés pour les substances contenues dans les produits réglementés en vertu de la Loi sur les aliments et drogues.

Sécurité des produits

Description : Dans le cadre de son mandat législatif, Santé Canada détermine, évalue, gère et communique aux Canadiens les risques pour la santé et la sécurité et les risques pour la santé associés aux produits suivants : produits de consommation; matières dangereuses utilisées au travail; cosmétiques; nouvelles substances chimiques; produits de la biotechnologie; dispositifs émettant des radiations; bruit environnemental; rayonnement solaire UV.

Pour remplir ce mandat, le Ministère fait avancer les recherches essentielles dans le domaine, effectue les évaluations du risque requises et élabore des stratégies de gestion du risque en vue de réduire au minimum l'exposition des Canadiens aux substances toxiques contenues dans les produits commerciaux, pharmaceutiques, de consommation et de soins personnels. Chaque année, le Ministère évalue les risques pour la santé d'environ 800 nouveaux produits chimiques et produits de la biotechnologie déclarés conformément au *Règlement sur les renseignements concernant les substances nouvelles* de la Loi *canadienne sur la protection de l'environnement* 1999 (LCPE). Lorsqu'un risque important est déterminé, des mesures de contrôle sont imposées. Santé Canada détermine quelles substances indiquées dans la *Loi sur les aliments et drogues* et arrivées sur le marché canadien entre 1987 et septembre 2001 doivent être évaluées d'abord, et travaille avec les intervenants au processus de déclaration pour ces substances. Le Ministère effectue également des évaluations préalables des risques pour la santé des microorganismes existants ainsi que des évaluations environnementales et des risques pour la santé des nouvelles substances figurant dans la Loi sur les aliments et drogues, et gère les risques au besoin.

Le Bureau national du Système d'information sur les matières dangereuses utilisées au travail (SIMDUT) de Santé Canada exerce, pour ses partenaires FPT du protocole d'entente, un leadership relativement à la communication efficace des risques associés aux produits chimiques utilisés au travail, y compris la prestation de programmes de formation destinés aux inspecteurs du SIMDUT partout au pays. En outre, le Ministère continuera de participer aux travaux de normalisation en vue d'assurer l'amélioration continue de la sécurité des dispositifs émettant des radiations.

Résultats escomptés		Indicateurs de rendement	
Réduire les risques de décès et de blessures associés à l'exposition des substances et des produits suivants : produits de consommation; cosmétiques; produits chimiques utilisés au travail; nouvelles substances chimiques; produits de la biotechnologie; dispositifs émettant des radiations; bruit environnemental; rayonnement solaire UV		◆ Exposition à des substances et à des produits dangereux associés aux produits suivants : produits de consommation; cosmétiques; produits chimiques; produits de la biotechnologie; dispositifs émettant des radiations; bruit environnemental; rayonnement solaire UV	
◆ Incidence déclarée de décès et de blessures associées à des produits;			

2006-2007*		2007-2008		2008-2009	
\$	ETP	\$	ETP	\$	ETP
25,6	334	25,5	334	25,5	334

* Les montants sont en millions de dollars

Principales initiatives

La stratégie de développement durable de Santé Canada (2004-2007) tient compte de son engagement à protéger l'état de santé des Canadiens contre les menaces environnementales. Dans le cadre de cette stratégie, le Ministère favorisera l'élaboration des *Recommandations pour la qualité de l'eau potable au Canada* ainsi qu'une approche intégrée « de la source au robinet » pour assurer la qualité de l'eau potable au Canada. Santé Canada, en collaboration avec d'autres ministères fédéraux, élaborera un « Protocole national d'intervention en matière d'éclosion et de contamination hydrique » pour assurer une approche fédérale coordonnée et systématique pour traiter les éclosions de maladies d'origine hydrique et la contamination de l'eau potable. Santé Canada est également partenaire avec les trois ordres de gouvernement qui sont représentés au sein du Technical Advisory Committee on Safe Drinking Water (TACSDW) en vue de traiter efficacement les questions de santé publique liées à l'eau potable en Alberta.

Le Ministère, pour aider la surveillance des risques pour la santé attribuables aux changements dans la qualité de l'air, continuera d'appuyer ses efforts de collaboration en recherche à l'échelle internationale en vue d'élaborer un indicateur de la santé de l'air, et publiera un outil pour évaluer les avantages d'une meilleure qualité de l'air afin d'aider à quantifier les effets des variations de la pollution atmosphérique sur la santé. Plus particulièrement, le Programme de la sécurité des milieux de la région de l'Ontario travaille à appuyer la Stratégie Canada États-Unis sur la qualité de l'air transfrontalier et examinera l'impact de la pollution atmosphérique sur la santé des enfants et d'autres populations vulnérables, comme les femmes enceintes et les personnes diabétiques, dans la région du bassin des Grands Lacs. Santé Canada terminera et publiera aussi l'Évaluation canadienne de la vulnérabilité de la santé au changement climatique en 2007, qui examinera les effets des changements climatiques sur la santé et le bien-être des humains.

Pour protéger l'état de santé des Canadiens contre les contaminants environnementaux, Santé Canada réalisera d'autres progrès dans le cadre de la Loi canadienne sur la protection de l'environnement 1999 (LCPE) en terminant la définition et l'établissement de l'ordre de priorité (« la catégorisation ») des 23 000 substances figurant dans la Liste intérieure des substances. La liste intérieure des substances est une compilation d'environ 23 000 substances utilisées, importées ou fabriquées au Canada à des fins commerciales. Le Ministère, qui travaille en partenariat avec l'Agence de santé publique du Canada, par l'entremise du Sous-comité des urgences chimiques du Comité mixte de protection civile, élaborera un programme d'intervention conjoint du Portefeuille de la Santé pour les urgences chimiques en 2006-2007. Santé Canada travaille également avec ses homologues provinciaux au renforcement des lignes directrices sur la protection de la santé des Canadiens en cas d'urgence nucléaire, et participera à des exercices internationaux d'urgence nucléaire en vue d'évaluer les conséquences de l'application de mesures de lutte contre la contamination par rayonnement.

Dans la région de l'Alberta, Santé Canada avec l'appui du Fonds d'Innovation-Santé, traite les effets et l'influence de l'état de l'environnement sur la santé des enfants de la région. Des représentants fédéraux, provinciaux, territoriaux et d'autres partenaires se réuniront dans le cadre d'un symposium d'une journée, actuellement en cours de préparation, afin d'échanger leurs connaissances reliées à la recherche, aux politiques et aux pratiques exemplaires dans le domaine de la santé des enfants et de l'environnement.

Sécurité des milieux

Description : L'environnement demeure un déterminant clé de la santé pour tous les Canadiens. Selon de récentes études, les facteurs environnementaux contribuent à un certain nombre de problèmes de santé. La pollution atmosphérique, par exemple, constitue un facteur pour 5 900 décès par année au Canada et est responsable de 30 % des cas d'asthme et de 5 % des cancers chez les enfants. Le fait d'améliorer l'état de santé de la population canadienne en s'occupant des facteurs environnementaux améliorera également sa qualité de vie. Le Programme de la sécurité des milieux vise à promouvoir et à protéger l'état de santé des Canadiens en définissant, en évaluant et en gérant les risques que posent les facteurs environnementaux pour la santé dans les milieux de vie, de travail et de loisirs. La portée des activités de ce secteur clé comprend la recherche, la qualité de l'eau potable, la qualité de l'air, les sites contaminés, le changement climatique et l'évaluation des risques posés par les effets environnementaux. Ce secteur clé comprend également les mesures en cas d'urgences environnementales; et parmi d'autres responsabilités, Santé Canada est responsable de coordonner les mesures en cas d'urgence nucléaire du Canada, aux termes du Plan fédéral en cas d'urgence nucléaire.

Résultats escomptés

Disponibilité et adoption partout au Canada de mesures de contrôle des risques que posent les contaminants environnementaux pour la santé humaine

Connaissances, compréhension et participation accrues des Canadiens concernant les questions de santé environnementale

Prise de décisions fondée sur des données scientifiques au Canada concernant les risques des contaminants environnementaux pour la santé**

Connaissances et capacités scientifiques accrues au sein de la communauté scientifique canadienne et collaboration internationale pour les questions de santé environnementale pour s'assurer que les Canadiens ont une plus grande confiance en l'information sur la santé environnementale et les mécanismes de protection*

- ◆ Pourcentage des obligations établies par la loi complétées et autres engagements
 - ◆ Pourcentage de Canadiens qui sont conscients que leur état de santé peut être affecté par des facteurs environnementaux
- ** Veuillez noter : Des travaux sont en cours afin d'élaborer une série d'indicateurs améliorée pour ce résultat escompté d'ici l'automne 2006.

Indicateurs de rendement

2006-2007	2007-2008	2008-2009
\$	ETP	\$
68,4	576	68,1
ETP	582	ETP
\$	68,3	584

* Les montants sont en millions de dollars

de supporter un processus décisionnel rigoureux et fondé sur des éléments probants.

Le Ministère élaborera une stratégie pour renforcer sa capacité d'inspection de la conformité à la Loi réglementant certaines drogues et autres substances (LRCDAS) et à son Règlement, en particulier le Règlement sur les précurseurs. Du point de vue régional, le Ministère participera aux travaux du comité sur la consommation de drogues illicites de la stratégie de partenariats sur la méthamphétamine de l'Alberta (Alberta Methamphetamine Partnership Strategy Committee on Illicit Drug Use).

La marhuana se classe dans la catégorie des substances contrôlées. Le Règlement sur l'accès à la marhuana à des fins médicales donne aux personnes souffrant de maladies graves ou débilitantes un accès à la marhuana. Il est important de noter que le Règlement ne traite que de l'usage de la marhuana à des fins médicales. Par le biais de l'autorité du Règlement, nous procéderons au lancement d'un projet pilote pour évaluer la faisabilité de la distribution de la marhuana à des fins médicales par le système traditionnel de distribution en pharmacie.

Santé Canada continuera de faire fonctionner quatre laboratoires régionaux du Service d'analyse des drogues (SAD) situés en Colombie-Britannique, au Manitoba, en Ontario et au Québec. Le programme de SAD comporte trois secteurs d'activités principaux : analyse des drogues (y compris l'identification régulière de pièces à conviction saisies par les services de police); soutien aux enquêtes sur les laboratoires clandestins (fabrication de drogues illicites); formation des clients du Service (policiers, procureurs de la Couronne). Les quatre laboratoires évaluent environ 100 000 échantillons par année pour des organismes d'application de la loi. Ce genre de travail vient appuyer l'élément « application des lois » de la Stratégie canadienne antidrogue, y compris les éléments de prévention, de réduction des méfaits et de traitement. Le laboratoire de l'Ontario établit également des normes en matière de drogues pour les quatre laboratoires du SAD situés partout au Canada et a été le premier en 2005 à faire une demande d'accréditation pour la norme 17025 de l'Organisation internationale de normalisation (ISO).

Stratégie antidrogue et substances contrôlées

Description : Santé Canada applique la *Loi réglementant certaines drogues* et autres substances et son Règlement, élabore des stratégies de réduction des méfaits et de promotion visant à lutter contre la consommation abusive d'alcool et de drogues (y compris les activités de promotion de la santé ciblant les jeunes) et offre des conseils d'experts scientifiques et des services d'analyse de drogues aux organismes d'application de la loi. Santé Canada dirige également la Stratégie canadienne antidrogue, qui a été renouvelée en 2003. La Stratégie a pour but de coordonner et d'améliorer les programmes de lutte contre la consommation abusive de substances partout au pays, et de renforcer les connaissances et les partenariats dans les domaines de la prévention, du traitement, de la réduction des méfaits et du renforcement de Canadiens plus en santé et des communautés.

Santé Canada peut compter sur divers partenariats et mécanismes de financement pour remplir son mandat dans ce domaine. Le Fonds des initiatives communautaires de la Stratégie antidrogue (FICSA) a été récemment créé afin de financer des initiatives aux échelles nationale, provinciale, territoriale et locale dans deux vastes domaines : promotion et prévention de la santé; réduction des méfaits. Le FICSA est géré par l'entremise des bureaux nationaux et régionaux de Santé Canada et du Secrétariat du Nord et vise dans son ensemble la lutte contre la consommation problématique de substances et veut promouvoir la sensibilisation de la population aux questions liées à l'alcool et à d'autres drogues. Le Programme de traitement et de réadaptation en matière d'alcoolisme et de toxicomanie (PTRMAT) vise quant à lui à améliorer les traitements offerts aux femmes et aux jeunes qui sont aux prises avec des problèmes de consommation abusive de substances. Santé Canada finance également le volet traitement des tribunaux de traitement de la toxicomanie.

Résultats escomptés		Indicateurs de rendement	
Réduire les risques pour la santé et la sécurité associés à la consommation de tabac et à l'abus de drogues, d'alcool et d'autres substances contrôlées en appliquant la <i>Loi réglementant certaines drogues</i> et autres substances et son Règlement, et en offrant un leadership national dans le cadre de la Stratégie canadienne antidrogue		<ul style="list-style-type: none">◆ Variation du taux de prévalence de l'usage et de la consommation abusive au Canada et dans les populations ciblées comme les jeunes◆ Niveau de mauvaise utilisation et d'utilisation abusive des substances contrôlées◆ Variation du type et du degré de comportements à risque liés à la santé◆ Variation de la nature et du degré des coûts liés à la santé et des coûts sociaux et économiques associés à l'usage et à la consommation abusive de substances contrôlées au Canada	
2006-2007*	2007-2008	2008-2009	
\$	\$	\$	ETP
65,1	64,8	65,0	347
347	347	347	347

* Les montants sont en millions de dollars

Principales initiatives

Des progrès se poursuivent concernant le Cadre national d'action pour réduire les méfaits liés à l'alcool et aux autres drogues et substances au Canada. Les éléments clés prévus incluent le lancement de l'Enquête de surveillance canadienne de la consommation d'alcool et de drogues, l'élaboration d'une stratégie nationale contre l'alcool, la mise en œuvre de la stratégie nationale de lutte contre la production et la distribution de marijuana

et de drogues synthétiques et le détournement des produits chimiques précurseurs, l'élaboration d'une approche nationale et intégrée aux produits psychotropes et l'établissement d'un accès à un seul site Web pour l'information concernant la Stratégie canadienne antidrogue. Il y aura une augmentation de recherche canadienne sur l'abus de drogues et d'alcool, ainsi qu'une analyse détaillée sur l'enquête sur les toxicomanies au Canada (ETC) des aspects uniques (par exemple, alcool, la jeunesse, etc.) afin

Malgré d'importantes percées notées concernant l'atteinte des objectifs fixés et le passage de la prévalence du tabagisme à 20 % ou moins de la population, certains segments de la population canadienne continuent de présenter un taux élevé de tabagisme; la diminution soutenue des taux globaux de tabagisme dépendra donc de la mesure dans laquelle nous réussirons à traiter le tabagisme auprès de ces groupes particuliers de la population. Par le passé, les jeunes adultes âgés de 20 à 24 ans avaient les taux de tabagisme les plus élevés comparativement aux taux de tous les autres groupes d'âge de la population canadienne, et cette tendance s'est maintenue. Selon l'Enquête de surveillance de l'usage du tabac au Canada, la prévalence du tabagisme chez les personnes âgées de 20 à 24 ans

était de 27 %, comparativement à 20 % pour l'ensemble de la population âgée de 15 ans et plus (Enquête de surveillance de l'usage du tabac au Canada). Par conséquent, le Ministère se concentrera sur les activités liées à la consommation de tabac chez les jeunes et les jeunes adultes, y compris les travaux avec les provinces et les territoires visant à déterminer les interventions et les orientations futures appropriées pour ce groupe démographique. Le Ministère appuiera également les activités de prévention et de renoncement ciblées dans le message antitabac au moyen d'initiatives de participation des jeunes, notamment le « Comité action jeunesse contre le tabac » de Santé Canada, dont le but est d'encourager les jeunes des quatre coins du pays à aider d'autres jeunes dans leur école et leur collectivité à cesser de fumer.

Lutte contre le tabagisme

Description : À titre de ministère responsable de la Stratégie fédérale de lutte contre le tabagisme, Santé Canada appuie l'approche des quatre piliers, soit la prévention, le renoncement, la protection et la réduction des méfaits. Santé Canada travaille avec ses partenaires pour mettre à l'essai et évaluer diverses approches de lutte contre le tabagisme. Par exemple, le Ministère élaborera et met en œuvre des campagnes médiatiques nationales et régionales visant à sensibiliser la population canadienne aux effets du tabagisme sur la santé et à fournir de l'information et des points de référence afin d'aider plus de Canadiens à cesser de fumer, et s'efforce de réduire l'exposition à la fumée secondaire dans les lieux publics et privés. Sur la scène internationale, Santé Canada, par l'entremise de sa Direction des affaires internationales, appuie des initiatives de lutte contre le tabagisme partout dans le monde.

Résultats escomptés

Canada	Faire passer la prévalence du tabagisme au sein de la population canadienne à 20 %	2006-2007*			
	Réduire de 30 % le nombre de cigarettes fumées au Canada	\$	ETP	\$	ETP
Canada	Taux de prévalence du tabagisme	53,8	282	53,6	282
	♦ Mesuré au moyen de l'Enquête de surveillance de l'usage du tabac au Canada	\$	ETP	\$	ETP
Canada	Taux de consommation; nombre de cigarettes vendues au	53,7	282	53,7	282
	♦ Mesuré au moyen des rapports de l'industrie	\$	ETP	\$	ETP
2007-2008					
2008-2009					

* Les montants sont en millions de dollars

Au Manitoba et en Saskatchewan, le Programme de la lutte au tabagisme continue de collaborer de sorte que la trousse d'outils du détaillant mise au point en Saskatchewan (en prévention des ventes aux mineurs) soit adaptée aux détaillants autochtones dans les réserves. Des agents chargés de l'application des lois continueront de travailler de concert avec les gestionnaires des programmes de prévention, de renoncement et de sensibilisation ainsi qu'avec les organismes communautaires. Les taux d'observation de la Loi sur le tabac invariablement élevés chez les détaillants de la région sont attribuables à l'innovation et aux partenariats.

Principales initiatives

Dans le cadre de son engagement à surveiller les progrès et les réussites de l'initiative de lutte contre le tabagisme et à faire rapport à cet égard, Santé Canada mènera une évaluation des cinq premières années de la Stratégie fédérale de lutte contre le tabagisme. Afin de déterminer l'orientation de la lutte contre le tabagisme au cours des cinq prochaines années, le Ministère analysera les résultats des séances de planification stratégique et des consultations tenues avec les partenaires au cours de l'année financière précédente. Les connaissances acquises au cours de cette évaluation aideront le Ministère à se concentrer sur ses ressources et ses activités pour lutter efficacement contre le tabagisme dans l'avenir.

Stratégie de mesure du rendement

Au sein du Portefeuille de la Santé, la Direction générale de la santé environnementale et de la sécurité des consommateurs travaille en partenariat avec l'Agence de santé publique du Canada, la Direction générale de la santé des Premières nations et des Inuits et la Direction générale des produits de

santé et des aliments afin d'atteindre des approches intégrées pour la santé. Le Ministère travaillera aussi avec les provinces et les territoires par l'entremise de divers comités afin d'élaborer des lignes directrices sur des questions comme l'eau potable et la coordination des mesures d'urgence nucléaire.

AAP de la Direction générale pour les résultats escomptés

Indicateurs de rendement

Réduire les risques pour la santé et la sécurité et améliorer la protection contre les dommages associés aux dangers en milieu de travail, aux risques environnementaux et aux produits de consommation (y compris les cosmétiques)	
◆ Taux moyen de prévalence de la consommation abusive de drogues et de substances au Canada	◆ Enquête de surveillance canadienne de la consommation d'alcool et de drogues
◆ Taux moyen de prévalence du tabagisme au Canada	◆ Enquête de surveillance de l'usage du tabac au Canada – Passage de la prévalence du tabagisme de 25 % à 20 %
◆ Incidence déclarée de décès ou de blessures associées aux produits suivants : produits de consommation, cosmétiques, produits chimiques utilisés au travail, nouvelles substances chimiques, produits de la biotechnologie, dispositifs émettant des radiations, bruit environnemental, rayonnement solaire UV	◆ Pourcentage de clients satisfaits des services de santé au travail et de planification des mesures d'urgence
◆ Statistiques du Secrétaire du Conseil du trésor sur les congés, les aménagements et les blessures en milieu de travail	◆ Enquêtes sur la satisfaction de la clientèle
◆ Pourcentage d'employés de la fonction publique qui demeurent au travail pendant ou après une blessure, une maladie ou un incident traumatique	◆ Pourcentage de Canadiens qui sont conscients que leur état de santé peut être affecté par des facteurs environnementaux

En s'appuyant sur ses travaux d'aide à la protection de l'état de santé des Canadiens, tout en respectant les principes de développement durable, le Ministère entreprendra de nouvelles recherches, établira un plus grand nombre de partenariats et exercera un meilleur leadership fédéral en vue d'améliorer les résultats pour la santé, particulièrement pour les populations vulnérables comme les enfants et les jeunes adultes. Pour ce faire, le Ministère :

- réduire les risques pour la santé et la sécurité associés au tabagisme et à la consommation abusive de drogues, d'alcool et d'autres substances contrôlées;
- réduire les risques pour la santé et la sécurité et aux produits chimiques et aux produits de la biotechnologie.

Du point de vue de la protection de la santé, le Ministère continuera de se concentrer sur les priorités réglementaires, comme le renouveau législatif et ses effets sur la *Loi sur les produits dangereux*, il s'occupera également des questions de réglementation liées au tabac et à d'autres substances contrôlées. Il continuera d'améliorer les programmes nationaux de conformité et d'application de la loi afin de s'assurer que ceux-ci sont efficaces, fondés sur les risques et en harmonie avec les programmes des partenaires et des intervenants provinciaux, territoriaux et internationaux.

Pour protéger la santé des Canadiens, le Ministère continuera d'utiliser des résultats de recherche fondés sur des données probantes pour formuler ses politiques en soins de santé. Ainsi, Santé Canada mènera des recherches et utilisera les travaux réalisés par un réseau d'organismes scientifiques externes pour réagir aux nouveaux défis en santé et en sécurité auxquels sont confrontés les Canadiens. Le Ministère établira un plan scientifique où seront décrites les orientations stratégiques scientifiques de ses cinq secteurs d'activités clés pour les années à venir, et il

continuera de travailler en étroite collaboration avec d'autres ministères et organismes fédéraux à des questions communes à caractère scientifique, comme la qualité de l'eau. Le Ministère compte sur des professionnels possédant de l'expérience en sciences appliquées (p. ex. toxicologie, épidémiologie, biologie) ainsi qu'en santé au travail et en santé publique (p. ex. personnel infirmier, médecins, psychologues, hygiénistes industriels) pour atteindre les principaux résultats visés pour les Canadiens. La Direction générale de la santé environnementale et de la sécurité des consommateurs doit faire concurrence à d'autres organisations pour attirer des scientifiques et des professionnels de la santé hautement qualifiés. Pour s'attaquer à ce risque, le Ministère élaborera et mettra en œuvre une stratégie des ressources humaines axée sur la planification de la relève, le recrutement et le maintien en poste afin de disposer des ressources humaines nécessaires pour soutenir ses activités dans le cadre de ce résultat stratégique.

Le mandat élargi du Ministère dans le cadre de ce résultat stratégique nécessite des partenariats durables qui ont un impact significatif sur l'état de santé des Canadiens. Par exemple, Santé Canada est le principal responsable de grands dossiers horizontaux qui nécessitent une collaboration interministérielle importante, comme la Stratégie canadienne antidrogue. Il contribue de façon importante aux efforts du gouvernement fédéral sur les questions de santé et d'environnement. Par exemple, le Ministère partage la responsabilité de la *Loi canadienne sur la protection de l'environnement* avec Environnement Canada, avec qui il travaille aussi étroitement sur certains dossiers, comme le changement climatique.

Au plan international, le Ministère continuera de faire progresser certains travaux clés menés de concert avec les États-Unis sur une variété de questions, notamment la santé des enfants et l'environnement ainsi que le protocole d'entente canado-américain sur la sécurité des produits de consommation.

RÉSUMÉ STRATÉGIQUE : Réduction des risques pour la santé et l'environnement de produits et de substances réglementés et milieux de vie et de travail plus sains

Activité de programme – Environnement sain et sécurité des consommateurs

Cette activité de programme contribue au résultat stratégique du gouvernement du Canada « Des Canadiens en santé ayant accès à des soins de santé de qualité ».

DÉPENSES PRÉVUES ET ÉQUIVALENTS TEMPS PLEIN (ETP)*				
	Prévision des dépenses	Dépenses prévues	Dépenses prévues	Dépenses prévues
(millions de dollars)	2005-2006	2006-2007	2007-2008	2008-2009
Dépenses brutes	289,9	305,4	301,9	302,3
Moins : Revenus disponibles prévus	12,0	15,4	15,7	16,0
Dépenses nettes	277,9	289,9	286,2	286,3
ETP	1 927	1 956	1 963	1 966

Remarques : L'augmentation des dépenses de 2005-2006 à 2006-2007 est principalement due à une augmentation du niveau de financement de la Loi canadienne sur la protection de l'environnement, qui est contrebalancée en partie par la réduction exigée par le Comité d'examen des dépenses (CED). La réduction des dépenses de 2006-2007 à 2007-2008 est principalement due à la temporisation du financement de mise en œuvre de la Stratégie sur la qualité de l'air transfrontalier et des mesures d'assainissement de l'air qui s'y rapportent. Cette baisse est contrebalancée en partie par une augmentation du niveau de financement de la Loi canadienne sur la protection de l'environnement.

Les chiffres comprennent un montant pour d'autres coûts d'infrastructure ministérielle et régionale appuyant l'exécution des programmes.

Description de l'activité de programme

Cette activité de programme touche de nombreux aspects de la vie quotidienne qui influent sur la santé des Canadiens, dont la qualité de l'eau potable, la qualité de l'air, l'exposition aux rayonnements, l'usage et la consommation abusive de drogues (y compris l'alcool), la sécurité des produits de consommation, le tabac et la fumée secondaire, la santé en milieu de travail et les produits chimiques dans le milieu de travail et dans l'environnement. Le Ministère participe également à d'autres activités liées à la santé et à la sécurité, y compris les initiatives du gouvernement en sécurité publique et antiterrorisme, préparation aux urgences chimiques et nucléaires, l'inspection des aliments et de l'eau potable pour les voyageurs et la planification d'urgence en santé pour les personnes de passage. La plupart de son travail découle de diverses mesures législatives, notamment

la Loi sur les aliments et drogues, la Loi réglementant certaines drogues et autres substances, la Loi sur les produits dangereux, la Loi sur les dispositifs émettant des radiations, la Loi canadienne sur la protection de l'environnement, la Loi sur le tabac et la Loi sur la quarantaine.

Le public et les gouvernements canadiens sont de plus en plus conscients du lien essentiel qui unit la santé humaine, le milieu physique et l'économie. De plus en plus de données montrent que les facteurs environnementaux, les produits dangereux, la cigarette, l'alcool et les substances contrôlées contribuent à un certain nombre de problèmes de santé, notamment le cancer, l'asthme et d'autres maladies et blessures qui en bout de ligne influent sur notre système de santé et notre société dans son ensemble.

efforts internationaux visant la création d'une approche harmonisée relativement à l'enregistrement et à la divulgation des essais.¹³ Ce processus permettra d'améliorer l'accès du public à une information

significative sur les essais cliniques tout en respectant les exigences relatives à la protection des renseignements personnels des patients et au secret commercial.

Notes en fin de chapitre et liens internet

1. Séance d'information sur les remèdes ayurvédiques, consultations régionales sur les lignes directrices en matière de diététique, séance d'information sur MedEffect et forum des intervenants régionaux sur les aliments.
2. www.pco-bcp.gc.ca/smartreg-regint/tr/08/tr_01.html
3. Nombre de demandes d'essais cliniques et de demandes d'essais expérimentaux de matériels médicaux soumises à Santé Canada

	2001	2002	2003	2004	2005 (1 et 2)
Demands d'essais cliniques (30 jours)	642	614	691	707	628
Demands d'essais cliniques (7 jours)	129	677	796	1 026	1 066
Demands d'essais cliniques - Total	771	1 291	1 487	1 733	1 694
Essais expérimentaux	89	94	100	123	131

4. www.cfr-cfr.gc.ca
5. hc-sc.gc.ca/dhp-mps/medeff/index_f.html
6. www.hc-sc.gc.ca/dhp-mps/vet/index_f.html
7. www.hc-sc.gc.ca/fn-an/surveill/index_f.html
8. www.hemophilia.ca/fr/10.1.4.php
9. www.hc-sc.gc.ca/fn-an/surveill/nutrition/commun/index_f.html
10. www.hc-sc.gc.ca/dhp-mps/compli-conform/clini-pract-prat/report-rapport/2003-2004_tc-tm_f.html
11. www.oag-bvg.gc.ca/domino/rapports.nsf/html/20040302cf.html
12. www.hc-sc.gc.ca/dhp-mps/compli-conform/info-prod/md-im/insp_strat_md-strat_insp_im_tc-tm_f.html
13. www.hc-sc.gc.ca/dhp-mps/prodpharma/activit/proj/enreg-clini-info/index_f.html

Transparence, responsabilité à l'égard du public et relations avec les intervenants

Description : Amélioration de la transparence des processus décisionnels au moyen de l'adaptation des justifications scientifiques des décisions dans un langage facile à comprendre. Santé Canada renforce aussi sa capacité de faire participer le public à des décisions qui, par le passé, n'étaient prises que par des experts.

Résultats escomptés

Indicateurs de rendement

Augmentation de la confiance du public dans la sécurité des produits de santé et du système réglementaire	◆ Degré de la confiance du public dans la sécurité des produits de santé, des aliments et de la nutrition
Degré de la confiance du public dans la sécurité des produits de santé, des aliments et de la nutrition	◆ Pourcentage des intervenants qui ont une opinion positive sur la transparence de la DGPSA au sujet de la réglementation des produits de santé et des aliments

2006-2007	2007-2008	2008-2009
\$	ETP	\$
18,3	163,0	167,7
	\$	ETP
	18,1	17,4
		167,0

L'augmentation de la confiance du public sera surveillée en vue de maintenir ou d'accroître ce degré de confiance. Le but est d'atteindre 85 % d'intervenants ayant une opinion positive au sujet de la transparence des initiatives portant sur les produits de santé et les aliments. La rétroaction des intervenants sera obtenue dans le cadre d'activités de consultation visant à apprendre et à s'améliorer avec le temps.

* Les montants sont en millions de dollars

La prise en compte de l'opinion des citoyens et des intervenants est essentielle à l'établissement d'une réglementation efficace dans l'intérêt du public. Le maintien et le renforcement de la confiance du public sont particulièrement importants dans un monde où les progrès scientifiques et techniques comportent autant d'avantages que de risques. La confiance du public dans le système de réglementation, notamment en ce qui a trait aux produits et aux services de santé, est une condition préalable pour garantir que des innovations intéressantes sont disponibles et qu'elles sont utilisées par les Canadiens. Par conséquent, Santé Canada est en train de développer de nouveaux outils pour améliorer la transparence et l'ouverture de son système de réglementation, y compris l'organisation de consultations nationales et de forums publics sur des questions relatives à la sécurité des médicaments et des aliments d'intérêt pour les Canadiens, ainsi que l'élaboration et la mise à jour des directives de salubrité des aliments, et assurer que les nouvelles substances utilisées dans les produits de santé satisfont aux exigences d'évaluation environnementales du Canada.

Dans son rapport d'avril 2004, le Comité permanent de la santé a recommandé que le Canada mette en œuvre des mesures pour assurer la confiance du public dans le processus d'essais cliniques, qui débuteront par l'établissement d'une base de données publique. Un groupe de travail externe a été chargé d'élaborer des options concernant l'enregistrement et la divulgation de l'information sur les essais cliniques. D'autres consultations publiques se tiendront au cours de la prochaine année et seront renseignées par des qu'ils consomment.

Le Bureau des initiatives pédiatriques de Santé Canada servira de centre de liaison pour une approche intégrée relativement à toute une gamme de questions de sécurité touchant les enfants, y compris les aliments et la nutrition et l'innocuité et l'efficacité des produits de santé. Le Bureau rassemblera les intervenants internes et externes afin qu'ils se consacrent sur ces questions. Ces activités permettront d'améliorer la qualité et la disponibilité des renseignements sur l'innocuité et l'efficacité des produits de santé utilisés par les enfants et sur l'innocuité et la qualité nutritive des aliments

internationales pour la transmission des données, nous obtiendrons et mettrons en œuvre un système nouveau et amélioré de surveillance des effets indésirables. Ce système permettra de recueillir et d'évaluer des rapports sur les effets indésirables qui portent sur le cycle de vie complet des produits de santé, à partir des essais prélabiles à la mise en marché jusqu'à l'utilisation après la commercialisation, et il permettra d'améliorer l'efficacité générale du traitement, de la gestion et de l'évaluation des rapports sur les effets indésirables. Le système sera conforme aux normes internationales recommandées par la Conférence internationale sur l'harmonisation. Pour les médicaments vétérinaires, nous avons élaboré un système de déclaration des effets indésirables, et nous prévoyons resserrer les liens entre les activités précédant et suivant la commercialisation. En outre, Santé Canada consultera des intervenants et l'Environnement Canada en vue de l'élaboration d'une réglementation sur l'évaluation environnementale afin de minimiser les effets des produits thérapeutiques sur l'environnement.

L'équipe nationale de la Gestion de la qualité et de l'information de l'Inspectorat de Santé Canada est gérée à partir de la région du Québec. Un des agents s'occupe du volet international des accords de reconnaissances mutuelles sur les bonnes pratiques de fabrication des médicaments. Grâce à ce programme, quatre évaluations concernant ces accords de reconnaissances mutuelles ont été effectuées avec la République Tchèque et la Hongrie.

Les essais cliniques nécessitent des inspections en matière de conformité pour protéger les participants aux essais et garantir l'intégrité et l'exactitude des données qui appuient la présentation de drogues nouvelles destinées au marché. Par l'entremise de l'initiative pour renforcer le système de sécurité, le nombre d'inspections des essais cliniques sera porté à 60 en 2006-2007, ce qui équivaut à 1,5 % de tous les essais cliniques, en vue de parvenir au niveau international de 2 % dans les années à venir. Cette mesure a été préconisée par le Comité permanent de la santé en 2004.¹⁰

Le Rapport de la vérificatrice générale de 2004 a souligné la nécessité de prendre des mesures au regard des appareils médicaux non approuvés sur le marché canadien.¹¹ Santé Canada a déjà mis en œuvre un programme d'inspection des établissements qui produisent des appareils médicaux ayant un financement limité en 2004. Pour 2006-2007, l'initiative d'innocuité des produits thérapeutiques portera le financement du programme à 1,8 million, ce qui permettra de mener un nombre approximatif de 170 inspections et activités de suivi dans ces établissements. Cela permettra d'augmenter notre présence dans l'industrie et favorisera une plus grande conformité au *Règlement sur les instruments médicaux*.¹²

Santé Canada continuera à travailler avec l'ASPC à la mise en œuvre du Plan canadien de lutte contre la pandémie d'influenza et au soutien du Programme mondial OMS de lutte contre la grippe. Le Ministère consacrera 6,2 millions de dollars sur cinq ans et 1,2 million de dollars sur une base permanente à des activités de planification et de préparation, à la prestation de directives réglementaires pendant l'élaboration d'un prototype de vaccin, à l'élaboration d'un plan d'intervention en cas d'urgence pour les organismes de réglementation et à la conception d'un processus d'approbation accélérée.

En 2006, une étiquette nutritionnelle interactive sera lancée sur le site Web de Santé Canada pour aider les Canadiens à faire des choix éclairés au sujet des aliments qu'ils consomment.⁷ Nous y expliquerons comment l'information sur la nouvelle étiquette des aliments, qui est obligatoire depuis décembre 2005

Surveillance de l'innocuité et de l'efficacité thérapeutique et gestion du risque

Description : Augmentation de la capacité de réagir à des questions de santé publique particulières grâce à l'élaboration de systèmes de contrôle et de surveillance, et d'activités plus vigoureuses de contrôle de la conformité et d'application de la loi.

Résultats escomptés		Indicateurs de rendement	
Renforcement de la vigilance à propos de la sécurité et de l'efficacité thérapeutique en ce qui concerne les produits de santé et les aliments commercialisés		◆ Évaluation générale des activités de surveillance de la sécurité et de l'efficacité thérapeutique de Santé Canada après commercialisation*	

2006-2007		2007-2008		2008-2009	
\$	104,8	\$	103,7	ETP	1 200,3
ETP	1 171,3			\$	99,2

* Le rendement de Santé Canada sera évalué au moyen d'enquêtes, de taux de conformité et de données sur les effets indésirables. Les résultats des enquêtes réalisées par la Société canadienne de l'hémophilie continueront à être examinés au fur et à mesure.⁸ En ce qui concerne les produits de santé, nous avons fixé un objectif de 95 % de conformité constatée dans le cadre des inspections, fondé sur des documents internes. Nous nous fierons aux données tirées de nos systèmes de déclaration des effets indésirables pour déterminer notre efficacité à satisfaire aux normes d'harmonisation internationale d'ici 2007.

** Les montants sont en millions de dollars

Conscients du caractère transversal des activités de surveillance en nutrition, nous continuerons à transférer les connaissances et à développer les capacités nécessaires pour élaborer et améliorer des politiques, des programmes et des interventions communautaires fondés sur des données probantes en collaboration avec les partenaires suivants : Statistique Canada, l'Agence de santé publique du Canada, les Instituts de recherche en santé du Canada, et des organismes d'intervenants, tels que le Groupe fédéral-provincial-territorial sur la nutrition, le Réseau sur la saine alimentation et le Groupe d'utilisateurs de l'Enquête sur la santé dans les collectivités canadiennes (ESCC). Les activités particulières réalisées en 2006-2007 comprendront l'approbation des indicateurs nationaux sur la nutrition, la diffusion d'un guide d'utilisation pour aider les intervenants en nutrition à interpréter les données sur la nutrition de l'ESCC, et la diffusion d'un rapport thématique sur la sécurité fondé sur les données de l'ESCC.⁹

L'Enquête canadienne 2006-2007 sur les mesures de la santé, menée par Statistique Canada, aidera à améliorer la capacité de Santé Canada de surveiller les déterminants d'une saine alimentation. Ainsi, les données recueillies seront analysées et aideront à prendre des décisions au sujet de l'enrichissement des aliments et de l'évaluation de la prévalence des facteurs de risque liés à la santé en ce qui concerne les maladies cardiovasculaires et le diabète.

Santé Canada mettra en œuvre de nouvelles mesures de sécurité en vue de renforcer les activités de surveillance après la mise en marché, conçues pour améliorer l'innocuité et l'efficacité des produits commercialisés liées à la Stratégie nationale sur les produits pharmaceutiques. Nous avons élaboré et utilisé le Système canadien d'information sur les effets indésirables des médicaments (CADRIS) pour surveiller les cas suspects des effets indésirables à des produits de santé. Des importants progrès technologiques réalisés et l'établissement de normes

Information, éducation et sensibilisation concernant les produits de santé, les aliments et la nutrition

Description : Réagir à l'augmentation de l'intérêt du public canadien à l'égard des questions de santé en diffusant davantage de renseignements, rédigés dans une langue facile à comprendre, sur la façon dont les Canadiens peuvent maintenir et améliorer leur état de santé.

Résultats escomptés	
Utilisation accrue des renseignements pour faire des choix sans danger et sain relativement aux produits de santé,	◆ Pourcentage de la population visée qui utilise les renseignements pour prendre ses décisions*
aux aliments et à la nutrition	

2006-2007		2007-2008		2008-2009	
\$	13,1	ETP	93,6	\$	12,4
ETP	93,6	\$	13,0	ETP	96,3
\$	13,1	ETP	93,6	\$	12,4
ETP	93,6	\$	13,0	ETP	96,3

* Les données sont analysées et rapportées à tous les deux ans. Santé Canada mènera une enquête pour déterminer dans quelle mesure les Canadiens utilisent les renseignements pour faire des choix sans danger et sains. L'objectif et les taux d'utilisation réels seront établis en 2006-2007. L'objectif devra être atteint en avril 2008.

** Les montants sont en millions de dollars

Santé Canada continuera à fournir des renseignements utiles sur les risques et les avantages liés aux produits de santé et aux aliments pour que les Canadiens soient en mesure de prendre des décisions éclairées concernant leur état de santé. Par exemple, nous élaborerons des politiques sur l'étiquetage des aliments qui feront partie d'une boîte à outils de politiques intégrées sur la santé et la salubrité des aliments, et qui pourront contribuer à donner suite plus rapidement et plus efficacement aux défis actuels et émergents en la matière. En tant qu'élément de l'initiative pour renforcer le système des sécurité des produits thérapeutiques, MedEffet nous permettra de gérer un site Web où seront affichés les alertes à la sécurité, les avis de santé publique, les communiqués de presse et les annonces à l'intention des professionnels de la santé, des consommateurs et d'autres parties intéressées.⁵ Un site similaire a été élaboré pour les médicaments vétérinaires.⁶ De plus, dans le cadre des démarches visant à mieux informer la population canadienne, Santé Canada continuera d'offrir des renseignements équilibrés sur les technologies les plus récentes et leurs applications, y compris la biotechnologie et la nanotechnologie.

La promotion et le soutien d'une saine alimentation et l'information des Canadiens au sujet des risques liés à l'approvisionnement en aliments sont essentiels pour

les aider à maintenir et à améliorer leur état de santé. Par exemple, le *Guide alimentaire canadien pour manger sainement* joue un rôle important en communiquant des messages sur la saine alimentation. En 2006, la révision du Guide alimentaire sera terminée et il sera diffusé, ainsi que des documents d'accompagnement, y compris une ressource à l'intention des intermédiaires et un outil interactif sur le Web. Le Guide alimentaire est révisé pour s'assurer que l'orientation qu'on y trouve continue à promouvoir un modèle alimentaire qui satisfait aux besoins en éléments nutritifs, qui favorise la santé et réduit le risque de maladies chroniques liées à la nutrition. De plus, la révision visera à améliorer la compréhension et l'application du Guide alimentaire. Avec l'Agence de santé publique du Canada, Santé Canada fait progresser le volet sur la saine alimentation de la Stratégie intégrée sur les modes de vie sains et les maladies chroniques, en mettant l'accent sur le leadership et la collaboration multisectorielles, à l'échelle nationale et internationale. En outre, grâce à cette initiative, Santé Canada élaborera des indicateurs et des objectifs en matière de nutrition conenus sur le plan national, améliorera les mesures de développement, de synthèse et d'échange de connaissances, et renforcera la capacité de surveillance de la nutrition.

médicaments vétérinaires et instauré des normes de service dépendantes du type de présentation. Nous pourrions respecter ces objectifs en augmentant les ressources humaines et en améliorant la collaboration grâce au renforcement de la coopération internationale, ainsi qu'en adoptant et en appliquant des techniques de gestion de projet. La Communauté des régulateurs fédéraux, un partenariat entre tous les ministères et organismes fédéraux qui ont un rôle de réglementation, travaille à respecter les exigences de la nouvelle Directive du gouvernement sur la réglementation intelligente proposée.⁴

Nous continuerons à élaborer et à appliquer des approches novatrices à la réglementation des produits de santé et des aliments dans le but d'améliorer et de soutenir la rapidité et l'efficacité du processus réglementaire, ce qui permettra de donner suite aux préoccupations des Canadiens au sujet de la salubrité, de l'efficacité et de l'accès. Nous élaborerons de nouvelles approches réglementaires concernant les produits radiopharmaceutiques utilisés pour le diagnostic et la radiothérapie; les allégations relatives aux effets particuliers sur la santé de certains produits alimentaires; l'homologation de produits médicamenteux pour appuyer l'accès hâtif à des pharmacothérapies prometteuses, ainsi qu'une approche nationale d'essais cliniques. En outre, un nouveau régime d'imputation de frais externes sera élaboré dans le cadre d'une stratégie de financement à long terme pour assurer que nous disposons de ressources suffisantes pour soutenir le rendement à la réglementation des médicaments humains et vétérinaires et d'autres produits thérapeutiques. Nous commencerons l'examen des règlements, qui prévoient une évaluation de l'innocuité avant la mise en marché et l'autorisation des aliments et des produits alimentaires avant qu'ils puissent être commercialisés.

Dans le cadre de l'initiative de Santé Canada pour renforcer le système d'innocuité des produits thérapeutiques, nous renforcerons la surveillance des essais cliniques et expérimentaux des matériels médicaux effectués au Canada, qui constituent un point d'accès des patients à des thérapies nouvelles

et innovatrices. Les essais cliniques et expérimentaux offrent des données d'innocuité et d'efficacité conformes au règlement avant qu'un produit ne reçoive une autorisation de mise sur le marché de Santé Canada. Le Ministère augmentera sa capacité, en 2006-2007, d'évaluer les présentations dans les délais par défaut, d'évaluer les rapports sur les effets indésirables cernés lors des essais cliniques et de produire des décisions en temps opportun; de détecter et de communiquer des signaux de sécurité provenant des données d'essais cliniques, et d'intervenir, de faire participer plus tôt les promoteurs des essais cliniques au processus. De plus, grâce à l'initiative en matière d'innocuité Santé Canada mettra à jour les normes nationales relatives au sang et aux cellules, tissus et organes, tout en continuant à élaborer et à mettre en œuvre un cadre réglementaire adéquat pour ces éléments. Un programme d'inspection relative à la conformité des établissements sera aussi mis en œuvre.

Santé Canada travaillera avec des organismes de santé et d'agriculture fédéraux, provinciaux et territoriaux qui participent à l'application du système national de salubrité des aliments pour mieux réagir à des questions de salubrité des aliments actuelles et nouvelles. Une initiative importante sera la Stratégie canadienne sur la salubrité des aliments. Les gouvernements fédéral, provinciaux et territoriaux, l'industrie, les universités et les groupes de consommateurs s'engagent à améliorer la gestion générale du système de salubrité des aliments au Canada en établissant une vision commune et des priorités nationales, ainsi que des résultats, des objectifs et des indicateurs nationaux en santé publique.

Nous continuerons de diriger l'élaboration d'un cadre fédéral d'intendance de la biotechnologie pour favoriser une approche intégrée de la gestion des risques et des avantages des produits et des services de biotechnologie, dans l'intérêt du public.

Stratégie de mesure du rendement

La Stratégie de mesure du rendement pour ce résultat stratégique nous aidera à mesurer nos résultats escomptés au fil du temps, et à déterminer si notre activité de programme actuelle est appropriée pour

assurer aux Canadiens l'accès à des produits de santé et à des aliments sûrs et efficaces, ainsi qu'à fournir des renseignements utiles pour faire des choix de santé sains.

Résultats escomptés	
Accès à des produits de santé et à des aliments efficaces et sûrs et à des renseignements en vue de choix de santé sains	
Indicateurs de rendement	
◆ Niveau de satisfaction des Canadiens et des professionnels de la santé vis-à-vis des renseignements diffusés pour faire des choix de santé sains et prendre des décisions éclairées	◆ Incidence des maladies d'origine alimentaire (lorsque l'aliment constitue l'agent causal)

Programmes et services clés

Amélioration de l'évaluation avant la mise en marché et du processus réglementaire	
Description : Accroître l'efficacité et l'efficience des fonctions de réglementation et faire en sorte qu'elles soient mieux adaptées aux besoins des Canadiens en simplifiant les processus et en travaillant plus étroitement avec d'autres organismes pour s'assurer que le Canada continue à compter sur un environnement réglementaire de calibre international.	
Résultats escomptés	
Amélioration de la rapidité, de la transparence et de la prévisibilité du processus réglementaire	
Indicateurs de rendement	

2006-2007	2007-2008	2008-2009
Amélioration de la rapidité, de la transparence et de la prévisibilité du processus réglementaire	◆ Pourcentage des arrêts de la charge de travail et pourcentage des décisions émises dans les délais prévus en ce qui concerne l'examen des présentations : - de produits pharmaceutiques - de produits biologiques - d'additifs alimentaires; de l'emballage, des contaminants chimiques; des nouveaux aliments, et le traitement des présentations relatives à la nutrition*	
\$ 125,8	\$ 124,4	ETP 1 198,0
ETP 1 164,3		\$ 119,1
		ETP 1 193,1

* Les données sont recueillies et rapportées tous les trimestres. Nous nous sommes engagés à atteindre 90 % des objectifs de rendement relativement à l'examen des présentations de nouvelles drogues pharmaceutiques d'ici mars 2006, et des présentations de nouvelles drogues biologiques d'ici mars 2007. Les données de base sur les résultats escomptés en matière de rendement sont accessibles dans les systèmes de suivi courants et les dossiers internes.

** Les montants sont en millions de dollars

Santé Canada contribuera au renouvellement de la réglementation par l'entremise de l'amélioration du rendement de la réglementation et de la modernisation du système de réglementation.² Par exemple, étant donné l'augmentation du nombre de présentations de drogues et leur complexité, les initiatives en vertu de la Stratégie d'accès aux produits thérapeutiques se poursuivront afin de réduire les arrières de présentations, ce qui nous permettra d'atteindre nos objectifs de rendement concernant les produits pharmaceutiques en mars 2006, et ceux concernant les thérapies biologiques et génétiques au plus tard en mars 2007.³ De plus, nous avons réduit les délais des présentations de

Bilatéralement, nous travaillerons avec la Food and Drug Administration des États-Unis par l'entremise d'un protocole d'entente à l'élaboration d'un ensemble unique de valeurs de référence concernant l'étiquetage nutritionnel tout en améliorant la compatibilité de nos approches relativement à l'enrichissement des produits alimentaires.

Les bureaux régionaux de Santé Canada participent à la prestation de notre mandat par l'élaboration et la prestation de programmes et de services clés, y compris la surveillance des risques, l'examen et l'inspection relativement aux risques associés à l'importation, à la vente et à la fabrication de produits de santé. En travaillant directement avec les intervenants régionaux et les gouvernements provinciaux et municipaux, les bureaux régionaux encouragent et facilitent la consultation et la collaboration.¹ Ces partenariats permettent à nos bureaux régionaux de participer à la surveillance des effets indésirables et d'aider à l'élaboration de mesures stratégiques relativement à la sécurité des aliments, à la nutrition, aux produits de santé naturels, à la résistance aux antimicrobiens et à l'efficacité des produits de santé. De plus, les laboratoires régionaux augmentent notre capacité scientifique d'élaborer et de gérer des recherches sur la salubrité des aliments et des projets de surveillance portant sur les toxines naturelles, les allergènes alimentaires, l'élaboration de méthodes et la nutrition dans le cadre du réseau de laboratoires nationaux. Deux de ces laboratoires appuient aussi nos responsabilités pour assurer la conformité des fabricants en ce qui concerne les exigences réglementées pour les produits de santé.

Nous travaillons avec des partenaires fédéraux scientifiques et technologiques en vue de promouvoir et de protéger la santé et la sécurité des Canadiens. Certains de nos travaux donnent lieu à la collaboration directe avec Agriculture et Agroalimentaire Canada, Environnement Canada, l'Agence canadienne d'inspection des aliments (ACIA) et l'Agence de santé publique du Canada dans le but d'élaborer des politiques et des règlements adaptés aux besoins, comme une stratégie canadienne pour la salubrité des aliments. Nous travaillons aussi, avec l'ACIA à la promotion de la salubrité des aliments en tant que priorité scientifique pour le Canada. Nos travaux permanents avec Statistique Canada et l'ASPC nous permettent de collaborer à la collecte de données sur la santé publique et de partager des renseignements importants pour notre analyse continue des éventuels risques pour la santé associés à de nouvelles maladies et pour notre préparation à cet égard.

Sur le plan international, Santé Canada travaille avec l'Organisation mondiale de la Santé (OMS) et d'autres organisations multilatérales sur des questions de salubrité des aliments et des produits de santé. Nous travaillons aussi avec d'autres gouvernements pour renforcer et promouvoir une plus large collaboration et encourager l'échange de renseignements techniques. Nous continuons à mettre en œuvre les engagements en matière de partenariat pour la sécurité et la prospérité de l'Amérique du nord, y compris l'organisation de discussions sur les processus d'examen des produits pharmaceutiques et la coordination de la réglementation de la salubrité des aliments, l'évaluation et le renforcement de la surveillance de la recherche avec les organismes reliés au Canada, aux États-Unis et au Mexique.

de santé concernant la protection d'assurance et le coût des produits pharmaceutiques et des produits connexes dans les systèmes actuels, et la réponse aux demandes de l'industrie concernant l'accélération des approbations et l'accroissement de la protection de la propriété intellectuelle.

Il existe des preuves concrètes de l'accroissement des taux de maladies aiguës et chroniques directement associées au régime alimentaire (le diabète, par exemple) dans la population canadienne. Bien que les Canadiens sont de plus en plus conscients des menaces pour leur santé que présentent des facteurs comme une mauvaise alimentation, l'inactivité physique et un poids excessif, les modes de travail et les loisirs de notre société ont changé, nous ont rendus moins actifs et plus dépendants des aliments très énergétiques, ce qui contribue à l'accroissement des taux de maladies chroniques. Quant à la salubrité des aliments, l'émergence de nouveaux agents pathogènes d'origine alimentaire et de maladies infectieuses (p. ex. l'influenza aviaire), ainsi que la menace de bioterrorisme (p. ex. lié au botulisme), ont fait en sorte d'accroître les attentes des consommateurs au Canada et à l'étranger à l'égard du rôle des gouvernements d'assurer la qualité et la salubrité de l'approvisionnement alimentaire du Canada.

Pour aller de l'avant, il faut continuer à moderniser les cadres législatifs et réglementaires pour se garder au courant de la science en évolution, des attentes des consommateurs, des développements au plan international et d'autres pressions de changement. Pour assurer une approche intégrée, nous suggérons qu'un plan à long terme afin de moderniser le système réglementaire pour les produits thérapeutiques soit élaboré, appuyé par une vision pour améliorer l'accès à des médicaments et à d'autres produits thérapeutiques sans danger, efficaces et abordables. Pour renforcer la collaboration avec les gouvernements provinciaux et territoriaux dans leur rôle de gestionnaires de leur système de santé et de leur régime d'assurance-médicaments, ce plan devra être lié à la Stratégie

soins de santé.

nationale relative aux produits pharmaceutiques. Du point de vue des aliments et de la nutrition, Santé Canada continuera de travailler avec le Portefeuille de la Santé, l'Agence canadienne d'inspection des aliments et d'autres partenaires à fournir un leadership sur les questions stratégiques des aliments dans le but d'améliorer les résultats de santé pour les Canadiens et réduire le fardeau sur le système de Santé Canada s'appuie solidement sur la science et sur la gestion du risque pour prendre des décisions politiques et réglementaires. Étant donné que les connaissances scientifiques et l'expertise technique sont des éléments essentiels pour l'élaboration de nos règlements, de nos politiques et de nos conseils, nous continuerons à effectuer des recherches en laboratoire. Nous nous concentrerons sur l'apparition de répercussions sur la santé humaine de produits chimiques potentiellement dangereux présents dans l'approvisionnement alimentaire, y compris les effets sur le comportement et sur le système immunitaire; les conditions qui favorisent la survie et la prolifération de bactéries infectieuses et toxigènes et la production de toxines par ces dernières; la vigilance par rapport aux aliments à risque; l'établissement de niveaux minimaux pour éviter les blessures aux être humains; les risques et les avantages associés à la présence de substances nutritives dans le régime alimentaire. Nous continuerons aussi à effectuer des recherches dans des domaines ayant trait à l'innocuité et à l'efficacité des agents biopharmaceutiques, y compris la sécurité de l'approvisionnement en sang, la virologie et les vaccins. Santé Canada fait face à un défi pressant en ce qui a trait au maintien de ses ressources humaines. Nous estimons qu'au cours des cinq prochaines années, un nombre important d'employés dans les domaines spécialisés et techniques, ce qui comprend les biologistes, les chimistes et les médecins, seront admissibles à la retraite. Nous poursuivons à cet effet notre planification des ressources humaines.

RÉSULTAT STRATÉGIQUE :
Accès à des produits de santé et à des aliments
efficaces et sûrs et à des renseignements en vue
de choix de santé sains

Activité de programme – Produits de santé et aliments

Cette activité de programme contribue au résultat stratégique du gouvernement du Canada « Des Canadiens en santé ayant accès à des soins de santé de qualité ».

DÉPENSES PRÉVUES ET ÉQUIVALENTS TEMPS PLEIN (ETP)				
	Prévision des dépenses	Dépenses prévues	Dépenses prévues	Dépenses prévues
(millions de dollars)	2005-2006	2006-2007	2007-2008	2008-2009
Dépenses brutes	294,6	303,3	300,4	289,3
Moins : Revenus disponibles prévus	37,7	41,2	41,2	41,2
Dépenses nettes	256,9	262,1	259,2	248,1
ETP	2 503	2 592	2 667	2 656

Remarques : L'augmentation des dépenses de 2005-2006 à 2006-2007 est principalement due à une augmentation du financement de la stratégie pour le renforcement de l'innocuité des médicaments, et est contrebalancée en partie par une réduction du financement de mise en œuvre de la stratégie d'accès aux produits thérapeutiques de Santé Canada ainsi que la réduction exigée par le Comité d'examen des dépenses (CED).

La baisse des dépenses de 2006-2007 à 2007-2008 est principalement due à la temporisation du financement consacré à la réponse de Santé Canada à la crise de l'encéphalopathie spongiforme bovine dans les domaines de la gestion du risque et de la recherche ciblée. La diminution des dépenses de 2007-2008 à 2008-2009 est principalement due à une réduction du financement de mise en œuvre de la Stratégie d'accès aux produits thérapeutiques de Santé Canada ainsi qu'à la temporisation d'un transfert d'Agriculture et Agroalimentaire Canada pour le Cadre stratégique pour l'agriculture.

Le changement sur le plan des ETP est dû à l'augmentation dans le poste des salaires du budget de fonctionnement.

Les chiffres comprennent un montant pour d'autres coûts d'infrastructure ministérielle et régionale appuyant l'exécution des programmes.

Description de l'activité de programme

À titre d'autorité fédérale responsable de la réglementation des produits de santé et des aliments, Santé Canada évalue et surveille l'innocuité, la qualité et l'efficacité de milliers de médicaments, vaccins, matériels médicaux, produits de santé naturels et autres produits thérapeutiques auxquels les Canadiens ont accès, ainsi que l'innocuité et la valeur nutritionnelle de leurs aliments. Dans le cadre de cette activité de programme, nous nous assurons aussi que les médicaments vétérinaires vendus au Canada sont salubres et efficaces pour les animaux, et que les aliments provenant d'animaux traités avec ces médicaments sont salubres. Enfin, nous favorisons la santé et le bien-être des Canadiens au moyen d'une vaste gamme d'activités portant sur les produits

de santé et les aliments, y compris l'élaboration de politiques et de normes sur la nutrition, telles que le *Guide alimentaire canadien pour manger sainement*. Une des principales responsabilités fédérales en matière de protection de la santé est la réglementation des produits thérapeutiques, en vertu du cadre législatif de la *Loi sur les aliments et drogues*. La population canadienne reconnaît bien et appuie le rôle du gouvernement fédéral en matière de protection de la santé et de la sécurité. Toutefois, le système de réglementation des médicaments et d'autres produits thérapeutiques doit relever de nombreux défis, notamment l'évolution rapide de la science et de la technologie, les attentes du public en matière d'accès, de sécurité et de transparence, l'amélioration des liens avec le processus décisionnel du système de soins

Recherche appliquée, diffusion et responsabilisation

Dans le domaine de la recherche appliquée et de l'analyse, nous appuyons la prise de décisions sur les politiques par l'élaboration et la mise en œuvre d'un programme stratégique de recherche sur les politiques pour les questions d'intérêt à moyen et à long terme, par l'aide à la coordination des activités internes et externes de recherche sur les politiques, et par le financement de recherches extra-muros dans le cadre du Programme de recherche sur les politiques en santé. Nous favorisons ainsi une culture axée sur le rendement et les résultats en élaborant les outils et la base d'information nécessaires pour une meilleure responsabilisation. Nous jouons un rôle clé en gestion du savoir en gérant un programme de diffusion des résultats de la recherche sur les politiques, dont la publication du *Bulletin de recherche sur les politiques de santé*, et en offrant des ensembles de données essentielles et les outils informatiques pour y accéder.

Résultats attendus

Les groupes cibles consultent les données, les analyses et les renseignements utiles pour l'élaboration de politiques et de programmes à partir de données probantes

- ◆ Les effets démontrés des renseignements et des outils d'analyse et du rendement sur l'élaboration de politiques et de programmes
- ◆ Le pourcentage de la population visée qui trouve utiles les renseignements et les outils d'analyse et du rendement
- ◆ Le pourcentage de nouveaux communiqués de Statistique Canada et de l'Institut canadien d'information sur la santé (ICIS) qui sont rapidement accessibles au sein de Santé Canada
- ◆ Le nombre de publications et de dossiers de données offerts sur le système électronique de données et d'information du Ministère

2006-2007		2007-2008		2008-2009	
\$	4,9	\$	36,6	\$	36,6
ETP	60	ETP	60	ETP	60

* Les montants sont en millions de dollars

Notes en fin de chapitre et liens internet

1. www.hc-sc.gc.ca/hcs-sss/delivery-prestation/fptcollab/2004-fmm-rpm/index_f.html

2. Pour plus d'information sur ces défis, consultez le Rapport d'étapes de la Stratégie nationale relative aux produits pharmaceutiques, été 2006.

3. www.regulation.gc.ca/default.asp?Language=Fr&Page=thegouvernementdirectivon

4. Le terme nanotechnologie désigne l'application de la science pour élaborer de nouveaux matériaux et produits, où au moins une dimension est inférieure à 100 nm; elle comporte la manipulation de matériaux à l'échelle du nanomètre – un nanomètre (nm) équivaut à un milliardième d'un mètre (10^{-9} m); il est cent fois plus petit qu'un virus.
- D'autres programmes et services qui contribuent à cette activité de programme représentent 140,5 millions de dollars pour 2006-2007.

Santé des femmes et analyse comparative entre les sexes

Santé Canada travaille de façon horizontale pour promouvoir des résultats équitables en santé tout au long de la vie chez les femmes, les hommes, les filles et les garçons. Le Ministère offre du leadership et de la surveillance à l'égard de la santé des femmes; de la recherche et de l'information sur la santé des femmes; des analyses comparatives entre les sexes et dans une perspective de diversité, en élaborant des politiques au sein du portefeuille de la Santé. Santé Canada finance les Centres d'excellence pour la santé des femmes, le Réseau canadien pour la santé des femmes et des groupes de travail en recherche, et en plus, collabore avec un large réseau d'organisations pour la santé des femmes et d'autres intervenants aux plans international, provincial et régional pour faire participer le public au processus d'élaboration de politiques.

Résultats attendus Indicateurs du rendement

Développement et transfert des connaissances des questions stratégiques particulières de santé

Capacité accrue de recherche de la politique de la santé (en cours)

- ◆ Diffusion des résultats de la recherche (p. ex., nombre et type d'études réalisées, nombre de demandes d'information, nombre de liens ajoutés aux sites Web)
- ◆ Évaluation du développement et du transfert de connaissances parmi les gouvernements et les intervenants
- ◆ Nombre de visites sur le site Web
- ◆ Évaluation de la capacité de recherche de la politique de la santé parmi les gouvernements et les intervenants clés

2006-2207		2007-2008		2008-2009	
\$	ETP	\$	ETP	\$	ETP
4,9	19	4,9	19	4,9	19

* Les montants sont en millions de dollars

Bureau de la mise en œuvre de la législation sur la procréation assistée

Description : Mise sur pied de l'Agence canadienne de contrôle de la procréation assistée

Résultats attendus					
Indicateurs du rendement					
<p>• Achèvement des nominations par le gouverneur en conseil des nouveaux administrateurs</p> <p>• Production, en temps opportun, de documents et de rapports sur l'élaboration de politiques.</p> <p>• Consultations à l'appui de l'élaboration de la réglementation.</p> <p>• Rédaction de règlements aux fins de publication préalable dans la Partie I de la Gazette du Canada</p> <p>• Rendement sera mesuré selon l'état d'approbation des plans, les évaluations et le stade de développement d'une version d'essai du Registre</p>					
2006-2207		2007-2008		2008-2009	
\$	4,9	\$	3,3	\$	1,6
ETP	29,8	ETP	22	ETP	8

* Les montants sont en millions de dollars

Renouveau législatif

<p>Santé Canada continuera d'élaborer une proposition pour remplacer par un nouveau cadre législatif sur la protection de la santé la Loi sur les aliments et drogues (1953), certaines dispositions de la Loi sur les produits dangereux (1969 – sécurité des consommateurs et produits industriels) et la Loi sur les dispositifs émettant des radiations (1970). L'objectif du nouveau cadre est de mettre à jour, de renforcer et d'intégrer la législation fédérale sur la protection de la santé afin de créer un système mieux adapté aux réalités sociales et technologiques actuelles et futures et de fournir les outils nécessaires pour mieux protéger la santé et la sécurité des Canadiens.</p>					
Résultats attendus					
Indicateurs du rendement					
<p>• Définition de buts et d'objectifs pour des stratégies particulières et des initiatives</p> <p>• Réflexion des buts et des objectifs définis dans les plans de travail et les priorités</p>					
2006-2207		2007-2008		2008-2009	
\$	1,3	\$	1,3	\$	1,3
ETP	0	ETP	0	ETP	0

* Les montants sont en millions de dollars

Activités internationales

Les risques et les menaces pour la santé publique qui proviennent de l'extérieur des frontières du Canada ont une incidence croissante sur la santé des Canadiens. La collaboration internationale sur l'élaboration et les politiques de santé mondiales est de plus en plus importante pour la capacité de réaction du système de santé au Canada. Santé Canada se positionne sur la scène internationale de manière à : prévoir et réagir aux développements en santé internationale et leurs effets sur les Canadiens et le système de santé au Canada, influencer sur les événements et les tribunes internationales en santé afin d'améliorer l'état de santé partout dans le monde; offrir un leadership sur certains enjeux de santé, comme les mesures d'urgence en cas de pandémie, le VIH/sida et le tabagisme; travailler avec la grande multitude de personnes en santé sur la scène mondiale pour faire progresser la santé et la sécurité de la santé.

Afin de façonner et de renforcer le programme d'action international sur la santé et les enjeux de soins de santé, en conformité avec les priorités et les valeurs du Canada, nous continuerons de travailler en étroite collaboration avec des organisations multilatérales telles que l'Organisation mondiale de la Santé (OMS) et l'Organisation panaméricaine de la Santé (OPS).

Résultats attendus		Indicateurs du rendement	
Développement et transfert des connaissances des questions stratégiques particulières de santé		♦ Diffusion des résultats de la recherche (p. ex., nombre et type d'études réalisées, nombre de demandes d'information, nombre de liens ajoutés aux sites Web)	♦ Evaluation du développement et transfert des connaissances parmi les gouvernements et les intervenants

2006-2207		2007-2008		2008-2009	
\$	21,8	\$	21,6	ETP	26
ETP	26	ETP	26	\$	22,0
ETP	26	ETP	26	ETP	26

* Les montants sont en millions de dollars

Activités intergouvernementales

Santé Canada est responsable de la mise en application de la Loi canadienne sur la santé (LCS) et, à cette fin, doit surveiller un large éventail de sources pour vérifier la conformité des provinces et des territoires aux critères et aux conditions de la Loi, travailler en partenariat avec les provinces et les territoires pour enquêter et résoudre les enjeux de conformité à la LCS, mener des activités pour encourager les provinces et les territoires à se conformer à la LCS, offrir des conseils stratégiques au ministre, l'informer des cas possibles de non-conformité à la Loi et recommander des mesures appropriées.

En outre, le Ministère offre des conseils stratégiques et coordonne un large éventail de questions stratégiques concernant le portefeuille de la Santé. Il collabore avec les partenaires provinciaux et territoriaux tout en s'assurant que les priorités fédérales progressent.

En vertu de la Loi sur les langues officielles et du Plan d'action pour les langues officielles, nous gérons des programmes de contribution pour la santé qui appuient la vitalité des communautés de langue officielle en situation minoritaire partout au Canada et nous nous assurons à ce que ces communautés soient toujours consultées.

Résultats attendus		Indicateurs du rendement	
Développement et transfert des connaissances des questions stratégiques particulières de santé		♦ Diffusion des résultats de la recherche (p. ex., nombre et type d'études réalisées, nombre de demandes d'information, nombre de liens ajoutés aux sites Web) ♦ Evaluation du développement et transfert des connaissances parmi les gouvernements et les intervenants	

2006-2007		2007-2008		2008-2009	
\$	ETP	\$	ETP	\$	ETP
44,0	64	29,8	64	29,8	64

* Les montants sont en millions de dollars

Politique du système de soins de santé

En septembre 2000, les premiers ministres ont convenu de poursuivre la réforme des soins de santé primaires à titre prioritaire et ont indiqué que l'amélioration des soins de santé primaires était essentielle au renouvellement des services de santé. Pour donner suite à cet engagement, le gouvernement du Canada a annoncé la création du Fonds pour l'adaptation des soins de santé primaires (FASP), un investissement de 800 millions de dollars de 2000-2001 à 2006-2007. Sous la forme d'accords de contribution, le Fonds aide les provinces, les territoires et divers intervenants au sein du système de santé à réformer le système de soins de santé primaires. Plus particulièrement, le Fonds aide à couvrir les coûts de transition découlant de la mise en œuvre d'initiatives durables visant à renouveler les soins de santé primaires à grande échelle. Ces initiatives amélioreront l'accès aux services, la qualité des soins, la reddition de comptes et l'intégration des services. Bien que le FASP ne soit pas permanent, son principal objectif est d'apporter des changements viables et permanents à l'organisation, au financement et à la prestation des services de soins de santé primaires. Le FASP reçoit l'appui d'un groupe consultatif FPT, et Santé Canada joue un rôle actif pour favoriser le dialogue et l'échange des connaissances entre les bénéficiaires du Fonds (organisations gouvernementales et non gouvernementales). Compte tenu que les initiatives financées par le FASP prendront fin en 2006-2007, tous les bénéficiaires devront déposer leurs rapports finaux, y compris leurs rapports d'évaluation, et des activités de diffusion sont prévues pour promouvoir l'application des connaissances et des résultats. En 2004-2005, on a effectué une évaluation à mi-parcours du Fonds afin d'évaluer la structure et l'efficacité. L'évaluation finale, ou bilan, sera effectuée en 2006-2007 et portera principalement sur les résultats et les conséquences du FASP, elle devrait être disponible au début de 2007-2008.

- ◆ une série de documents de synthèse mettant en évidence les données disponibles dans des secteurs comme la prise en charge des maladies chroniques, la gestion de l'information, la prestation de soins en collaboration (p. ex. équipes) et la méthodologie d'évaluation;
 - ◆ une série de feuilles de renseignements sur les résultats et les données disponibles sur chaque initiative;
 - ◆ une conférence nationale en février 2007;
 - ◆ une base de données, accessible sur le site Web de Santé Canada, servant de ressource permanente aux provinces, aux territoires, aux intervenants et au public.
- Plusieurs gouvernements provinciaux et territoriaux se sont publiquement engagés à continuer la réforme des soins de santé primaires entamée dans le cadre du FASSP.

Étant donné les lacunes en matière de données quantitatives sur les soins de santé primaires au Canada, le FASSP a servi à financer l'Institut canadien d'information sur la santé afin qu'il élabore un ensemble d'indicateurs nationaux faisant l'objet d'un consensus. Le FASSP aura permis d'améliorer la capacité d'évaluation des soins de santé primaires. De plus, le Conseil canadien de la santé surveille les progrès accomplis dans le domaine et assure la reddition de comptes connexes.

Remarque : À l'exception du Québec, l'ensemble des provinces et des territoires (en fait, tous les bénéficiaires) doivent présenter des rapports périodiques à Santé Canada, notamment des rapports détaillés, des rapports financiers, des rapports finaux sur les résultats et des rapports d'évaluation finale. Ces exigences sont conformes à la Politique sur les paiements de transfert du Conseil du Trésor et aux exigences connexes de responsabilisation associées aux accords de contribution.

Résultats attendus

Indicateurs du rendement

- ◆ Diffusion des résultats de la recherche (p. ex., nombre de questions stratégiques particulières de santé et type d'études réalisées, nombre de demandes

- ◆ Diffusion des résultats de la recherche (p. ex., nombre et type d'études réalisées, nombre de demandes d'information, nombre de liens ajoutés aux sites Web)
- ◆ Evaluation du développement et transfert des connaissances parmi les gouvernements et les intervenants

* Les montants sont en millions de dollars					
2006-2207	2007-2008	2008-2009	ETP	\$	ETP
66,1	20	0,1	0	0,1	0

* Les montants sont en millions de dollars

Depuis février 2004, le Groupe de travail interministériel fédéral sur la traite des personnes, y compris le trafic d'organes et de tissus, composé de 14 ministères fédéraux et coprésidé par les ministères des Affaires étrangères et de la Justice, a été chargé de coordonner les efforts fédéraux de lutte contre la traite des personnes et d'élaborer une stratégie fédérale. Nous sommes les responsables pour le Portefeuille de la Santé et nous continuons de coordonner l'apport du portefeuille tout en favorisant une approche holistique de l'inclusion des facteurs liés à la santé, aux différences entre les deux sexes et aux considérations de la diversité.

Stratégie de mesure du rendement

Nous continuons de renforcer notre mesure du rendement pour fournir des renseignements sur nos activités. Pour rationaliser les nombreux mécanismes de rapport, nous avons adopté une nouvelle stratégie qui rattache nos activités directement aux résultats à court terme (de un à trois ans), à moyen terme (de trois à cinq ans) et à long terme (cinq ans ou plus). Cette approche appuiera toutes les exigences de rapports publics, y compris l'architecture des activités de programme et le Rapport ministériel sur le rendement. Durant ce cycle de rapport, nous

travaillerons à la collecte d'information au sujet du rendement pour faire un rapport sur les trois prochaines années.

Les résultats à moyen terme prévus pour l'activité de planification en politiques et de programme de recherche qui sont définis ci-après, seront abordés dans divers secteurs. En conséquence, un large éventail d'activités à l'échelle du portefeuille seront orientées vers le même objectif.

Résultats attendus		Indicateurs du rendement	
Définition de buts et d'objectifs pour des stratégies particulières et des initiatives		♦ Réflexion des buts et des objectifs définis dans les plans de travail et les priorités	
Développement et transfert des connaissances des questions stratégiques particulières de santé		♦ Diffusion des résultats de la recherche (p. ex., nombre et type d'études réalisées, nombre de demandes d'information, nombre de liens ajoutés aux sites Web)	
		♦ Évaluation du développement et transfert des connaissances parmi les gouvernements et les intervenants	

Santé Canada est un membre actif du Ontario Information Technology Network (OITN) du Conseil fédéral de l'Ontario (CFO). Le but du OITN du CFO est de cerner et de promouvoir les domaines de collaboration ainsi que de favoriser l'échange de ressources en TI et d'information sur la planification stratégique entre les gestionnaires fédéraux des TI dans la région. Deux domaines importants de collaboration sont le soutien et la connectivité des TI dans les régions éloignées, et la planification intégrée de l'infrastructure des TI.

Risques et défis en ressources humaines

Les défis des ressources humaines sont très semblables à ceux qui se posent dans d'autres domaines au Ministère, voire partout au gouvernement fédéral, notamment le roulement du personnel, le maintien en poste et le recrutement d'analystes des politiques qualifiés et bien informés. Étant donné l'étendue de notre participation aux travaux de politique et l'importance d'une capacité viable en politiques, ces enjeux doivent être abordés afin que nous maintenions une capacité suffisante pour aborder les enjeux de politique à venir. Malgré notre rôle considérable dans les programmes de recrutement (le Programme de perfectionnement des économistes et des sociologues), nous continuons de faire face à ce défi qui est de recruter et de garder des analystes des politiques, étant donné la concurrence dans ce domaine de travail.

Liens horizontaux

Nous continuons de gérer et de collaborer à des dossiers horizontaux pour le Ministère, et de créer des liens à Santé Canada et à l'extérieur. Par exemple, nous gérons et coordonnons le Groupe de travail interministériel fédéral sur la santé mentale. Nous travaillons aussi à l'échelle du portefeuille de la Santé pour que la santé publique soit intégrée à nos conseils et à notre soutien au ministre.

En poursuivant les thèmes horizontaux de recherche sur les politiques (Innovation en santé, Recherche sur la réglementation, Santé des communautés et durabilité de la santé des Premières nations et des Inuits) issus de l'exercice d'établissement des priorités de recherche sur les politiques effectué en 2004-2005, des comités directeurs du Portefeuille pour chacun des quatre thèmes prioritaires ont été créés en vertu de protocoles d'entente parmi nos directions générales et à l'Agence de santé publique du Canada. Ces protocoles guideront nos activités de recherche durant les deux à quatre prochaines années.

Canada, notamment de nouveaux moyens possibles de prévenir, de diagnostiquer, de soigner et de guérir des milliers d'affections. La conception de nouveaux médicaments issus de la génomique (pharmacogénomique) et d'outils de diagnostic découlant de cette science influera également sur la prestation des soins de santé. Nous ferons de la recherche et des analyses stratégiques pour appuyer les discussions et les actions du gouvernement fédéral au sein de tribunes nationales et internationales sur les enjeux tels que la pharmacogénomique, la mise en commun des brevets en génétique médicale, la propriété intellectuelle en recherche sur les cellules souches, et l'élaboration et la mise en œuvre de directives de l'OCDE sur l'assurance de la qualité en dépistage génétique. Nous étudierons également des méthodes pour stimuler l'innovation et analyserons divers mécanismes d'incitation pour aiguillonner la recherche et la conception afin d'aborder les besoins de santé, dont l'élaboration de vaccins.

Nous sommes toujours déterminés à travailler avec nos partenaires au dépistage précoce des enjeux et à la surveillance des nouvelles technologies qui se répercutent sur la santé des personnes et des populations vulnérables et sur le système de santé en général. Nous appuierons l'élaboration de recommandations et de stratégies fondées sur des données probantes, par une collaboration soutenue pour appuyer l'excellence dans la conduite de recherches sur les humains selon les règles de l'éthique, dans des domaines comme l'éducation à l'éthique en recherche, l'amélioration de la qualité, l'examen de modèles d'agrement et l'établissement de normes de procédure pour les conseils d'éthique en recherche; l'élaboration de politiques sur les bonnes pratiques de recherche liées aux biobanques d'échantillons de biomatériaux humains; la définition des retombées sociales possibles de la nanotechnologie.⁴

Cette année, nous continuerons de coordonner l'apport du Ministère à un projet de directive du gouvernement sur les activités de réglementation, qui vise à s'appuyer sur la politique actuelle de réglementation du gouvernement du fédéral par la promotion d'une plus grande transparence de la réglementation, l'harmonisation de la planification législative et réglementaire, et la coordination et la collaboration stratégiques avec les partenaires provinciaux, territoriaux et internationaux.

Etablissement de la nouvelle Agence canadienne de contrôle de la procréation assistée et du nouveau règlement

Nous continuerons de travailler à la mise en œuvre de la Loi sur la procréation assistée, y compris le soutien à l'établissement de l'Agence de contrôle de la procréation assistée à Vancouver, en Colombie-Britannique, en 2006-2007. L'Agence délivrera des autorisations et fera des inspections à l'égard des activités en vertu de la Loi. Le processus de recrutement mené par le gouverneur en conseil pour nommer les nouveaux administrateurs de l'Agence sera terminé.

Nous nous occupons en même temps d'élaborer les éléments du cadre de réglementation, qu'il faut mettre au point avant que l'Agence puisse instituer le régime de délivrance d'autorisations et de réglementation à l'égard des activités en vertu de la Loi. Parce qu'il y a très peu de directives, de normes ou de règlements d'établis en ce moment, il faut mener de vastes consultations judiciaises pour nous assurer que les objectifs de réglementation sont atteints tout en réduisant au minimum le fardeau occasionné par la réglementation aux Canadiens. On s'attend à ce que le règlement soit promulgué en 2006-2007 pour donner effet à la dernière interdiction en attente, et le travail se poursuivra afin d'élaborer les derniers éléments du cadre de réglementation pour la mise en application de la Loi.

Ressources humaines en santé

Le secteur des soins de santé exige l'embauche d'un grand nombre de personnes. Entre 60 et 80 % de

chaque dollar en santé au Canada est consacré aux ressources humaines en santé (RHS), et ceci ne comprend pas les frais associés à l'éducation. On assiste actuellement à une pénurie de médecins, d'infirmières, d'infirmiers et d'autres fournisseurs de soins. Les RHS représentent l'un des quatre fondements nécessaires pour apporter de réels changements au système de santé. Par conséquent, il est essentiel de renforcer la capacité au sein du système et d'assurer la relève ainsi que la répartition et l'utilisation adéquates des RHS pour réduire les délais d'attente et améliorer l'accès en temps opportun aux soins de santé.

En nous inspirant des activités de RHS appuyées par l'Accord de 2003 et le Plan décennal de 2004, nous poursuivrons la mise en œuvre de la Stratégie en matière de ressources humaines en santé par l'entremise de trois grandes initiatives (Planification pancanadienne des ressources humaines du secteur de la santé, Formation interprofessionnelle pour une pratique en collaboration centrée sur le patient, et Recrutement et maintien en poste) et de l'initiative relative aux professionnels de la santé diplômés à l'étranger, qui fournira des fonds additionnels pour augmenter le nombre de professionnels de la santé en accélérant et en élargissant le processus d'évaluation et d'intégration des professionnels de la santé diplômés à l'étranger dans les gouvernements participants.

Rôle de la science

C'est dans les innovations et les découvertes scientifiques que résident les plus grands avantages éventuels pour l'état de santé des Canadiens. La science offre également une base de données probantes pour les politiques et les programmes qui de notre travail dans de nombreux secteurs de politique des sciences de la santé, nous nous concentrerons sur les points suivants en 2006-2007 :

- ♦ L'augmentation marquée de la progression et de l'utilisation de techniques génétiques à l'intérieur du système de santé a des répercussions évidentes pour la durabilité du système de soins de santé au

des gouvernements et des initiatives de collaboration antérieures dans ce secteur. Ces activités seront liées, au besoin, aux initiatives fédérales de modernisation du système réglementaire sur les produits thérapeutiques ainsi qu'à la gestion intégrée des produits pharmaceutiques des divers régimes d'assurance-médicaments d'autorité fédérale.

Renouveau législatif et réforme de la réglementation

Dans le cadre du renouveau législatif en matière de protection de la santé, qui vise à combler les lacunes du fondement législatif de Santé Canada, le Ministère, en collaboration avec l'Agence de santé publique du Canada, poursuit l'examen de sa législation sur la protection de la santé. L'examen servira à moderniser et à améliorer les principales lois actuelles, en l'occurrence la *Loi sur les aliments et drogues* (1953), la *Loi sur les produits dangereux* (1969) et la *Loi sur les dispositifs émettant des radiations* (1969), grâce au renforcement des dispositions législatives sur la protection de la santé. Le cadre législatif qui résultera de l'exercice servira à moderniser et à renforcer la législation fédérale actuelle sur la protection de la santé et fournira une orientation stratégique précise. Dans le cadre de l'exercice, le Ministère participe également à l'examen de la législation proposée pour déterminer s'il faut procéder avec une seule loi ou continuer avec l'approche progressive qui a été utilisée pour l'adoption rapide de la nouvelle *Loi sur la mise en quarantaine* (2005).

Sous l'égide de l'initiative de la réglementation intelligente du gouvernement du Canada, Santé Canada contribue activement à l'élaboration de plusieurs politiques, cadres et outils pour moderniser le système de réglementation canadien afin qu'il puisse mieux réagir aux défis qui se présentent, notamment les progrès scientifiques rapides, la mondialisation, les risques transfrontaliers pour la santé, etc. L'initiative vise à créer un système de réglementation robuste et souple qui non seulement protégera au maximum la santé, la sécurité et l'environnement, mais aussi fera la promotion d'une économie novatrice.

comme la recherche, l'échange d'information et de connaissances et les pratiques exemplaires.

Stratégie de gestion des produits pharmaceutiques

La pharmacothérapie est un élément de plus en plus important dans les soins de santé modernes. Lorsqu'ils sont prescrits et utilisés adéquatement, les produits pharmaceutiques peuvent améliorer les résultats de santé des personnes et réduire les coûts dans d'autres secteurs de soins, par exemple dans les hôpitaux. La fabrication de nouveaux médicaments peut apporter de plus grands bienfaits encore dans l'avenir. Malgré ces bienfaits, les médicaments sur ordonnance posent bon nombre de défis associés à l'accès équitable et abordable ainsi qu'à l'innocuité et à l'efficacité des médicaments, à l'utilisation d'un traitement médicamenteux optimal ainsi qu'à la durabilité du système de soins de santé.²

Santé Canada joue différents rôles à diverses étapes du cycle de vie des produits pharmaceutiques, notamment dans les étapes de recherche et de fabrication, d'approbation de mise en marché, de prescription, d'accès, d'utilisation et de remboursement des coûts. En vue d'améliorer les résultats de santé des Canadiens et la durabilité du système, nous nous efforcerons d'optimiser ces rôles par l'entremise des politiques, de la réglementation et des programmes disponibles afin de mieux intégrer les produits pharmaceutiques à un système de santé robuste et homogène. Nous chercherons à tirer parti des possibilités dans des secteurs comme l'innocuité et l'efficacité des médicaments après leur mise en marché, la prescription et l'utilisation adéquates des médicaments ainsi que le rôle relatif à l'établissement des coûts et à la recherche du Conseil d'examen du prix des médicaments brevetés.

Nous continuerons à travailler avec les provinces et les territoires sur les activités relatives aux produits pharmaceutiques initiées en vertu de l'Accord de 2004 sur la santé dans le cadre de la Stratégie nationale relative aux produits pharmaceutiques. Cette stratégie représente une approche intégrée et concertée visant à relever les défis liés aux produits pharmaceutiques et qui s'inspire des rôles partagés

l'échéancier de toutes les étapes restantes, mais il s'efforcera tout de même de faire en sorte que tout se déroule le plus rapidement et le plus efficacement possible.

Pandémie d'influenza

La sécurité de la santé est un élément essentiel des objectifs du Canada pour la politique de la santé, la politique étrangère et la sécurité nationale. Le défi de la sécurité de la santé le plus pressant en ce moment est la menace d'une pandémie d'influenza. Il est donc essentiel que le gouvernement du Canada soit prêt pour une pandémie d'influenza et que des mesures soient prises avec les partenaires des secteurs public et privé au pays et au plan international afin de renforcer les préparatifs partout au Canada.

Les effets et la gravité potentielle ont donné lieu à une coopération et une collaboration sans précédent sur un enjeu de santé mondial. Nous continuerons de jouer un rôle actif dans la prévention et la préparation en cas de grippe aviaire et de pandémie d'influenza chez les humains. Cela comporte une étroite collaboration avec l'Agence de santé publique du Canada, responsable des mesures au gouvernement du Canada en cas de pandémie d'influenza. Nous renforcerons les préparatifs dans les domaines clés de responsabilité du Ministère, c'est-à-dire la santé des Premières nations et des Inuits, la réglementation des vaccins et les services de santé au travail destinés aux fonctionnaires fédéraux. De plus, nous compléterons un plan de continuité des opérations en cas de pandémie d'influenza afin de garantir un soutien aux employés et que les services essentiels continuent d'être dispensés dans l'éventualité d'un absentéisme de personnel à grande échelle.

Nous nous concentrerons également sur la collaboration internationale aux mesures et aux interventions en cas de grippe aviaire ou de pandémie d'influenza, élément essentiel des préparatifs internes au Canada. Les gouvernements de partout dans le monde ont qualifié la grippe aviaire de « menace mondiale » et reconnu qu'une collaboration internationale était nécessaire pour contrôler l'écllosion de grippe aviaire H5N1 et se préparer pour une

Santé mentale

pandémie d'influenza. De grands efforts sont déployés par le biais d'organisations multilatérales (p. ex., l'Organisation mondiale de la Santé, l'Organisation pour l'alimentation et l'agriculture et l'Organisation mondiale de la santé animale), d'organismes régionaux (p. ex., la Coopération Économique Asie-Pacifique et le Partenariat nord-américain pour la sécurité et la prospérité) et d'autres tribunes, comme le G8, pour collaborer à l'état de préparation.

La santé mentale et le bien-être sont essentiels à la qualité de vie des Canadiens, tout comme le développement social et économique. Par ailleurs, des maladies mentales comme la dépression, les troubles anxieux, la schizophrénie et les troubles bipolaires constituent un important défi de santé publique. Elles touchent au moins un canadien sur cinq et entraînent des coûts importants pour le système de santé, la

société et l'économie. En mai 2006, le Comité sénatorial permanent des affaires sociales, des sciences et de la technologie a publié un rapport sur la maladie mentale, la santé mentale et la toxicomanie au Canada. Intitulé *De l'ombre à la lumière*, le rapport met en évidence l'ampleur du défi associé à la santé mentale, à la maladie mentale et à la toxicomanie ainsi que la nécessité pour les gouvernements de collaborer pour s'attaquer à cette question importante. À l'heure actuelle, le Canada est le seul pays du G7 qui ne possède ni stratégie nationale ni plan d'action à cet égard. Le gouvernement fédéral collabora avec ses partenaires à constituer le fondement d'une approche nationale à la santé mentale et à la maladie mentale au Canada.

En outre, Santé Canada continuera de soutenir l'élaboration de politiques et de programmes valables en santé mentale au sein du gouvernement fédéral, des provinces et des territoires. Il s'agit notamment d'améliorer constamment les programmes, les services et le soutien santé mentale offerts aux Premières nations et aux Inuits ainsi que d'accroître les efforts visant à améliorer la santé mentale et le bien-être de l'ensemble des Canadiens dans des domaines

pour la gestion du cas, des soins infirmiers, des produits pharmaceutiques liés aux soins palliatifs et des soins personnels en fin de vie;

◆ travaux visant à assurer aux populations servies par les ministères fédéraux (particulièrement les Premières nations, les Inuits et les vétérans) l'accès aux services de soins à domicile précisés dans l'Accord;

◆ soutien continu au Réseau des pratiques exemplaires en matière de soins de santé primaires, qui vise à faciliter l'échange de renseignements et à surmonter les obstacles communs au progrès;

◆ travail avec le Conseil de la santé qui a comme mandat de faire le suivi de la mise en œuvre de l'Accord de 2003 des premiers ministres sur le renouvellement des soins de santé, d'établir un rapport annuel à ce sujet, et de rendre compte des progrès accomplis sur les éléments mentionnés dans l'Accord de 2004 sur la santé.

En 2006-2007, nous continuerons de collaborer avec nos homologues provinciaux et territoriaux à la mise en œuvre des engagements concernant la réforme du système de soins de santé.¹

Le Fonds pour l'adaptation des soins de santé primaires (FASSP) (800 M\$ sur six ans) offre le financement aux provinces et aux territoires à soutenir leurs efforts à la réforme de leurs systèmes de soins de santé primaires. L'un des objectifs de la réforme des soins de santé primaires est d'améliorer les activités de promotion de la santé et de prévention des maladies (tant pour les soins primaires que secondaires) afin d'aider les Canadiens à choisir des modes de vie sains et, ainsi, de réduire l'incidence d'affections comme le diabète et le cancer. Puisque les initiatives financées par le FASSP prendront fin en 2006-2007, nous avons prévu des activités de diffusion de l'information pour promouvoir l'application des connaissances et des résultats. À leur tour, ces activités de transfert des connaissances favoriseront les activités en cours sur la réforme des soins.

Hépatite C

En concertation avec les autres ministères qui participent au *Plan d'action pour les langues officielles*, nous travaillerons à la mise en œuvre de politiques et de pratiques administratives afin de garantir que la prestation d'une responsabilité renforcée de la *Loi sur les langues officielles*, présentées en novembre 2005, soient prises en compte dans la prestation des services de santé aux communautés de langue officielle en situation minoritaire partout au Canada.

Le gouvernement du Canada est déterminé à aider toutes les personnes infectées par le virus de l'hépatite C. Le 25 juillet 2006, le premier ministre a annoncé que le gouvernement avait conclu une entente sur les éléments du règlement visant l'indemnisation des Canadiens infectés par le virus de l'hépatite C à partir du système d'approvisionnement en sang avant le 1^{er} janvier 1986 et après le 1^{er} juillet 1990. En vertu de l'entente, le gouvernement du Canada versera près d'un milliard de dollars dans un fonds de règlement spécial. Le montant de l'indemnisation sera établi en fonction du principe de parité avec le montant déjà octroyé par le gouvernement fédéral aux personnes infectées entre 1986 et 1990.

Les indemnisations seront versées sur la base de la valeur actuelle, c'est donc dire que les plaigants seront dédommages en un seul versement en fonction, notamment, de l'état actuel de leur maladie et de la probabilité que celle-ci progresse. Cette mesure permettra également de minimiser les coûts administratifs.

Le gouvernement du Canada fera tout son possible pour terminer rapidement les étapes nécessaires avant que les personnes puissent commencer à recevoir leurs indemnisations. L'entente définitive doit être peaufinée et approuvée par les tribunaux de quatre autorités compétentes, et une structure administrative doit être mise en place afin d'évaluer les réclamations et d'effectuer les paiements. Le gouvernement fédéral ne peut pas contrôler

de couverture, des incohérences à aborder les risques pour la santé, et une insuffisance de pouvoirs d'application de la loi.

Nous offrons des conseils d'orientation stratégique et menons des initiatives pour faire avancer la santé des femmes et accroître la compréhension des interactions entre les sexes et les autres déterminants de la santé qui touchent les résultats de santé des femmes, des hommes, des filles et des garçons tout au long de leur vie.

Nous faisons de la recherche et des analyses pour améliorer la disponibilité, la qualité et l'utilisation de données probantes pour la prise de décisions sur les politiques de santé. Nous atteignons notre but en définissant les besoins futurs en recherche sur les politiques, en menant des recherches extra-muros soumises à l'examen des pairs afin de satisfaire à ces besoins, en communiquant des résultats au sein de Santé Canada et ailleurs, et en offrant de l'expertise et des outils nécessaires pour faire une analyse pertinente et rigoureuse des options stratégiques en santé.

Nos priorités

En plus de suivre les nouveaux enjeux sur une base continue, nous continuons de participer activement à diverses activités d'analyse et à en recueillir de précieux renseignements afin de définir les risques futurs pour les Canadiens et les défis à venir à Santé Canada. Il est important de noter que de nombreux facteurs externes peuvent influencer sur notre capacité de nous concentrer exclusivement sur nos priorités (p. ex., l'attention accrue aux mesures et interventions d'urgence mondiales en cas de pandémie de grippe, ou la coordination des efforts lors de catastrophes naturelles). Nous avons l'intention de nous concentrer sur les priorités suivantes en 2006-2007 :

Partenariat dans la réforme de la santé
Dans l'Accord de 2004 sur la santé, les gouvernements fédéral, provinciaux et territoriaux se sont engagés à procéder à des réformes du système de santé en vue d'améliorer les délais

d'accès à des soins de qualité. En vertu de l'Accord, le gouvernement fédéral verse 4,1 milliards de dollars aux provinces et aux territoires sur une période de 10 ans, ce qui comprend un montant de 5,5 milliards de dollars pour appuyer les provinces et les territoires dans leurs investissements et leurs efforts visant à réduire les délais d'attente. En décembre 2005, les gouvernements des provinces et des territoires ont annoncé une première série de 10 points de repère fondés sur des données probantes dans des secteurs comme le dépistage et le traitement du cancer, la chirurgie cardiaque, l'arthroplastie du genou et de la hanche et la chirurgie de la cataracte. Santé Canada travaillera avec les provinces et les territoires à l'élaboration d'une garantie sur les délais d'attente pour les patients. La garantie de soins a été proposée par de nombreux experts comme l'une des mesures possibles pour réduire les délais d'attente.

Nous avons accompli des progrès sur toutes les initiatives mentionnées dans l'Accord, et tous les gouvernements vont de l'avant avec la réforme de leur système de santé. Nous poursuivons les travaux relatifs à la mise en œuvre des initiatives de l'Accord de 2004 sur la santé dans les domaines suivants :

- ◆ mise en œuvre de l'initiative relative aux professionnels de la santé diplômés à l'étranger, qui fournira des fonds supplémentaires pour accélérer et élargir l'évaluation et l'intégration de diplômés en santé formés dans un pays où le gouvernement participe à l'initiative;
- ◆ suivi de l'engagement à fournir d'ici 2006, en fonction des besoins déterminés, une couverture au premier dollar pour certains services de soins à domicile, notamment : des soins actifs à domicile de courte durée pour la gestion des cas pendant deux semaines, les médicaments administrés par voie intraveineuse liés au diagnostic posé au moment du congé de l'hôpital, les soins infirmiers et personnels; des soins actifs communautaires de santé mentale fournis à domicile pour la gestion du cas pendant deux semaines et des services d'intervention d'urgence, et des soins en fin de vie

RÉSULTAT STRATÉGIQUE : Amélioration des connaissances afin de répondre aux priorités en matière de santé et de soins de santé

Activité de programme : Politique, planification et information en santé

Cette activité de programme contribue au résultat stratégique du gouvernement du Canada « Des Canadiens en santé ayant accès à des soins de santé de qualité ».

DÉPENSES PRÉVUES ET ÉQUIVALENTS TEMPS PLEIN (ETP)				
Prévisions des dépenses 2005-2006	Dépenses prévues 2006-2007	Dépenses prévues 2007-2008	Dépenses prévues 2008-2009	
375,1	288,4	218,2	215,0	Dépenses brutes
717	627	604	588	ETP

Remarques : La baisse des dépenses de 2005-2006 à 2006-2007 est principalement due à la réduction du niveau de financement du Fonds pour l'adaptation des soins de santé primaires, à la temporisation du supplément pour la santé du Nord en vertu de l'Accord de 2003 des premiers ministres sur le renouvellement des soins de santé ainsi qu'à la réduction exigée par le Comité d'examen des dépenses (CED).

La baisse des dépenses de 2006-2007 à 2007-2008 est principalement due à la temporisation du Fonds pour l'adaptation des soins de santé primaires. La diminution des dépenses de 2007-2008 à 2008-2009 est principalement due à une réduction du financement de mise en œuvre de la Stratégie d'accès aux produits thérapeutiques de Santé Canada.

Les chiffres comprennent un montant pour d'autres coûts d'infrastructure ministérielle et régionale appuyant l'exécution des programmes.

Description de l'activité de programme

Cette activité de programme a pour objectif d'offrir des conseils d'orientation stratégique et du soutien au

Ministre dans sa prise de décisions pour protéger et

améliorer l'état de santé des Canadiens. Santé Canada

appuie la prestation de programmes et de services aux

Canadiens en élaborant des politiques, en créant et en

maintenant des liens avec les partenaires fédéraux,

provinciaux et territoriaux pour appuyer la réforme du

système de soins de santé. Nous travaillons aussi avec

des organisations internationales pour faire progresser

le programme mondial en santé, et offrons le concours

d'experts au Canada afin d'assurer la santé et la

sécurité des Canadiens dans un monde plus sain.

Nous offrons du leadership en planification stratégique

pour le Ministère. Nous mettons en application la

Loi canadienne sur la santé et collaborons avec les

provinces et les territoires au renouvellement et au

soutien des soins de santé. Nous collaborons avec

d'autres pour rendre les services de soins de santé

accessibles aux communautés de langue officielle en

situation minoritaire, et l'interface entre les différents
secteurs du système de soins de santé.

Pour que tous les Canadiens aient accès aux services
de santé à l'endroit et au moment où ils en ont besoin,
pour que la qualité des services soit continuellement
améliorée et que le système puisse fournir les soins
nécessaires aujourd'hui et pour que l'on ait la capacité
de définir et d'adapter les nouveaux besoins et défis
à venir, nous nous concentrons sur les efforts de
renouvellement, entre autres, sur les ressources
humaines en santé.

Des efforts sont aussi déployés dans les domaines
législatif et réglementaire. Le Renouveau législatif
et réglementaire est une occasion de doter le
portefeuille de la Santé d'un important cadre législatif
modernisé fort attendu. La législation de la protection
de la santé qui forme la base de la réglementation
à Santé Canada est en grande partie désuète et
ne tient pas compte des progrès technologiques
modernes ni des attentes du public, d'où des lacunes

Analyse des activités de programme par résultat stratégique

2

lignes directrices de dotation, de la mise à l'essai des nouveaux outils et méthodes de dotation et de la mise en œuvre d'un plan d'action sur la surveillance de la dotation. La LMF et le renforcement des services gouvernementaux par un processus de planification des ressources humaines aidera à Ministère à disposer des ressources humaines dont il a besoin pour offrir ses services à la population canadienne.

Principes du développement durable intégrés à la pratique

Santé Canada continuera de travailler afin de remplir les engagements du Ministère décrits dans sa Stratégie de développement durable 2004-2007, intitulée *Incarner le changement désiré*, dans laquelle les responsables des programmes et des services décrivent comment ils mettront les principes de développement durable en pratique.

Une reconnaissance de la dimension sociale et de ses effets pour la santé sera assumée afin de mieux intégrer ce pilier au sein des piliers que sont l'environnement et l'économie, dans le cadre de l'élaboration de la prochaine stratégie, soit la Stratégie de développement durable 2007-2010. Au cours de la prochaine année, Santé Canada s'efforcera de travailler avec les autres ministères fédéraux et de fixer des objectifs communs, le cas échéant, afin de faciliter l'établissement de liens plus solides entre les activités favorisant une approche axée sur le développement durable dans des domaines d'intérêt commun. Santé Canada contribuera aussi aux initiatives à l'échelle du gouvernement, notamment en intégrant au Ministère la politique d'approvisionnement écologiquement durable.

Notes en fin de chapitre

1. Pour plus d'information sur les Lois législatives, veuillez consulter le site Web du Ministère de la Justice : lois.justice.gc.ca/fr/index.html
2. www.phac-aspc.gc.ca/new_f.html
3. www.cihr-irsc.gc.ca/
4. www.hmirc-ccrmd.gc.ca/
5. www.pmprb-cepmc.gc.ca/
6. www.hc-sc.gc.ca/hl-vs/reprod/agenc/index_f.html

l'entremise d'organisations telles que l'Organisation mondiale de la Santé. Nous acheverons la mise en œuvre du Cadre stratégique de la coopération internationale en matière de réglementation, qui assurera l'établissement des priorités et l'évaluation efficaces des activités de réglementation. Nous établirons un protocole d'entente avec la *Pesticides and Veterinary Medicines Authority* d'Australie afin d'accroître la coopération et la communication de l'information à l'échelle internationale. Nous mettrons en œuvre des initiatives de coopération en matière de réglementation dans le cadre de protocoles d'entente et d'accords de reconnaissance mutuelle, concernant des échanges informatiques et techniques, notamment, avec la Suisse, les États-Unis, la Chine et l'Australie. Santé Canada met également en place un accord avec la *Therapeutic Goods Administration*, du *Department of Health and Ageing* d'Australie, qui prévoit la reconnaissance des certificats des systèmes de gestion de la qualité délivrés pour les matériels médicaux.

En réaction aux défis et aux risques des ressources humaines

Le processus de planification des ressources humaines de Santé Canada appuie les objectifs opérationnels du Ministère.

Le rapport annuel sur les indicateurs des ressources humaines du Ministère définit les questions relatives de gestion des ressources humaines, les risques et les défis, et définit les activités à entreprendre pour y répondre. Par exemple, l'augmentation chaque année du nombre d'employés admissibles à la retraite. Par conséquent, nous demandons aux gestionnaires, dans leur planification des ressources humaines, de définir une relève et des stratégies de transfert des connaissances pour que le Ministère puisse continuer à gérer le roulement du personnel et à fournir aux Canadiens des résultats concrets.

Étant donné les questions particulières des ressources humaines au niveau de la direction

générale, tous les plans des ressources humaines des directions générales précisent les risques et les activités dans le but de les traiter. À titre d'exemple, mentionnons que toutes les directions générales ont élaboré une stratégie afin de traiter l'écart dans la capacité linguistique de leurs groupes de relève clés. De plus, le Ministère reconnaît les grands besoins afin de renouveler la collectivité des ressources humaines et ainsi, participe à une initiative interministérielle pour recruter et forger des professionnels qualifiés en ressources humaines. Santé Canada est à élaborer une plan d'une stratégie ministérielle en ressources humaines qui répondra aux risques de la direction générale et du ministère, et offrira une orientation pour le processus de planification intégré en ressources humaines pour 2007-2008.

En tant que ministère à vocation scientifique, Santé Canada engage des scientifiques à titre de chercheurs et responsables de la réglementation, dans le domaine de la santé et dans les sciences pures et appliquées. Le Ministère a défini plusieurs spécialités scientifiques comme « zones de pénurie » et mis en place une stratégie de recrutement et un répertoire d'emplois afin de disposer d'un bassin de candidats pour combler les postes vacants.

De plus, le Ministère effectue régulièrement une analyse de l'effectif pour définir les lacunes relatives à la représentation des groupes visés par l'équité en matière d'emploi (femmes, Autochtones, personnes ayant un handicap et membres des minorités visibles) et définir des mesures à prendre pour combler ces lacunes. À la suite du 2 avril 2004, la représentation des employés des groupes visés par l'équité d'emploi a atteint ou dépassé la proportion de ces personnes disponibles dans la population active.

Enfin, en 2006-2007, nous continuerons à soutenir la mise en application de la *Loi sur la modernisation de la fonction publique* (LMFP), principale pierre d'assise de la stratégie générale du gouvernement du Canada, pour moderniser la gestion des ressources humaines, au moyen des activités de formation et de communication, de l'examen des politiques et des

Santé Canada : travailler en collaboration

À Santé Canada, nous comprenons l'importance de travailler en collaboration pour offrir aux Canadiens des programmes et des services efficaces. Le fait de travailler en utilisant une approche intégrée et horizontale nous permet de profiter de nos forces et de fournir des analyses stratégiques et scientifiques efficaces dans nos nombreux domaines d'expertise. C'est la raison pour laquelle Santé Canada est déterminé à poursuivre une collaboration horizontale pour la période de planification. Il existe de multiples manières pour lesquelles Santé Canada collabore horizontalement avec ses partenaires à améliorer et à maintenir l'état de santé des Canadiens.

♦ Au ministère

À Santé Canada, nous sommes organisés pour répondre aux divers besoins en santé des Canadiens. Nous collaborons à l'interne pour offrir aux Canadiens les meilleurs services et programmes possibles. Ce faisant, nous mettons à profit non seulement nos forces, mais aussi nos expériences dans une situation donnée. Parmi les exemples d'initiatives horizontales du Ministère, mentionnons les programmes de lutte contre le tabagisme et la toxicomanie, les programmes d'hygiène du milieu et les recherches sur les résidus de pesticides.

♦ Dans le Portefeuille de la Santé

Le fait d'offrir un leadership stratégique et une coordination en santé au sein du Portefeuille de la Santé donne à Santé Canada un rôle important dans l'élaboration et la mise en œuvre des programmes et des services aux Canadiens. Nous collaborons de façon horizontale sur un bon nombre d'initiatives en santé comme avec l'Agence de santé publique du Canada (ASPC) au sujet de la Stratégie sur les modes de vie sains et les maladies chroniques ainsi que les questions relatives aux mesures et aux interventions d'urgence. Nous obtenons beaucoup de nos données de l'ASPC sur la santé et la surveillance.

D'autres exemples d'initiatives transversales, mentionnons la stratégie de lutte contre l'alcoolisme, les programmes des Premières nations et des Inuits, la préparation à une pandémie et les repères sur la santé ainsi que les indicateurs.

♦ Au gouvernement du Canada

Santé Canada reconnaît l'importance des initiatives horizontales partout au gouvernement du Canada. Santé Canada est l'un des plus grands ministères du gouvernement fédéral, et la santé est un élément clé de la plupart des programmes et services du gouvernement. Certains des programmes interministériels auxquels nous contribuons incluront la *Loi canadienne sur la protection de l'environnement* et la réglementation des pesticides, ainsi que l'initiative d'amélioration des services et la Stratégie du développement durable.

♦ Dans les provinces, les territoires et chez

les Autochtones

Santé Canada travaille en collaboration avec les provinces, les territoires et les organisations autochtones sur des domaines prioritaires tels que la mise en œuvre des engagements des premiers ministres dans le *plan décennal pour consolider les soins de santé*. Des efforts de collaboration continus viseront à combler l'écart dans les résultats de santé entre la population canadienne en général et les Premières nations et les Inuits; à faire de l'accès rapide à des soins de qualité une réalité pour tous les Canadiens; à poursuivre l'élaboration et la mise en œuvre de la Stratégie nationale sur les produits pharmaceutiques; à déployer des efforts incessants pour la santé publique et la préparation à une pandémie. Nous entreprendrons également un examen des engagements de la Réunion des premiers ministres et des dirigeants autochtones de 2005.

♦ À l'échelle internationale

À l'échelle internationale, Santé Canada explore les moyens de renforcer la capacité de réglementation des pays en voie de développement, en particulier en ce qui a trait aux produits importés, par

santé par divers moyens et sont donc plus informés que jamais et plus disposés à parler de questions délicates en santé. Ils veulent aussi essayer d'autres moyens d'aborder leurs préoccupations de santé et font intervenir certains facteurs, dont ceux d'ordre religieux et culturel. Ils prennent une part plus active dans l'examen du système de soins de santé public et attendent des gouvernements qu'ils abordent les questions que cet examen suscite avec ouverture et transparence.

Détérioration de l'environnement physique

Le rapport entre la santé humaine et l'environnement est l'un des domaines les plus complexes auxquels font face les gouvernements au Canada. La santé de nombreux Canadiens continuera d'être menacée par la pollution de l'air, de l'eau et du sol, le changement climatique et l'aminçissement de la couche d'ozone. Les incidences pour la santé de nombreux risques environnementaux ne sont pas entièrement comprises. L'incidence croissante des maladies respiratoires attribuables à la mauvaise qualité de l'air pourrait augmenter avec l'expansion des zones urbaines et la progression des changements

climatiques. La santé des communautés autochtones du Nord est tout particulièrement vulnérable aux menaces causées par les importantes modifications associées aux changements climatiques. Santé Canada doit se préparer à aborder les attentes du public concernant la protection en plus d'offrir plus de renseignements élaborés sur les incidences de santé indésirables et en améliorant ce qui serait nécessaire.

Vers la mondialisation intégrale

Tous les ministères, y compris Santé Canada, doivent être conscients de l'accroissement de la libre circulation des gens, des biens et des services, et des conséquences que cela peut avoir. Pour les gouvernements et le milieu de la santé, la question n'est plus de savoir « si » une pandémie va se déclarer, mais « quand » cela se produira. La vitesse à laquelle une pandémie peut se propager aux quatre coins du monde est alarmante. Pour contrer une telle

catastrophe, Santé Canada participe activement, en tant que membre ou responsable, à des activités internationales, comme l'initiative de protection de la santé mondiale et le Groupe de travail sur la santé de l'APEC.

La responsabilité sociale du Canada qui consiste à continuer de prendre des mesures pour résoudre les problèmes de santé croissants auxquels font face les nations les plus pauvres du monde ne fera qu'augmenter, tandis que le VIH-sida et d'autres maladies nouvelles et réémergentes, la pauvreté et la mortalité infantile, les blessures et les maladies non transmissibles continueront à creuser l'écart d'espérance de vie entre les pays développés et ceux qui le sont moins.

Toutefois, il existe des possibilités pour aider la communauté internationale à tirer profit de nos succès et de notre expérience dans de nombreux secteurs, notamment les modes de vie sains, le renoncement au tabagisme, la santé des jeunes enfants ainsi que la prévention des maladies, les vaccinations et l'accès à l'eau potable, pour n'en nommer que quelques-uns.

Nouvelles maladies et blessures au Canada

Bien que les menaces de maladie à l'extérieur de nos frontières soulèvent des préoccupations importantes, le taux croissant de maladies chroniques et de blessures au Canada est tout aussi alarmant. On estime à plus de 60 000 le nombre de Canadiens qui mourront du cancer cette année seulement, et à 79 000 ceux qui mourront d'une maladie cardiaque. Les blessures sont la principale cause de décès chez les Canadiens âgés de 1 à 44 ans. Ce qui rend cette statistique particulièrement alarmante est qu'un bon nombre de ces décès aurait pu être évité. Une population mieux informée est une population plus en santé; Santé Canada et ses partenaires doivent se pencher sur ces questions et fournir aux Canadiens l'information dont ils ont besoin pour faire des choix individuels sains.

Environnement opérationnel de Santé Canada

En faisant le point sur les tendances nationales et internationales concernant divers aspects et en surveillant les nouveaux risques pour la santé des Canadiens, nous pouvons mieux comprendre l'environnement opérationnel de Santé Canada et élaborer des initiatives ainsi que des politiques appropriées. La description des risques, des possibilités et des priorités pour la santé, au Canada il y a cinq ans ne correspond pas à la description d'aujourd'hui et pourrait être très différente de la situation à laquelle nous ferons face dans cinq ou dix ans.

Le nouveau visage du Canada

Plusieurs changements se produisent actuellement dans la société canadienne, et ils ont des effets sur les politiques et les programmes élaborés à Santé Canada. Il est bien connu qu'au Canada les personnes âgées sont de plus en plus nombreux et vivent plus longtemps. Ainsi de nouveaux défis se présentent à tous points de vue pour la prestation de soins de santé. La moyenne des enfants canadiens aura une mère plus âgée et nous comptons moins d'enfants par famille; une proportion croissante de ces enfants vivra avec un seul parent et nombre d'entre eux connaîtront encore la pauvreté, en particulier ceux qui vivent seulement avec leur mère. Le système de santé continuera à faire face aux défis que représente une santé compromise et de mauvaises habitudes de vie chez une grande proportion d'enfants vivant dans la pauvreté. Au cours de la prochaine décennie, les Canadiens vivront probablement dans un centre urbain. Un sur cinq appartiendra à une minorité visible ayant des racines en Asie ou au Moyen-Orient et parlera une autre langue que le français ou l'anglais. Une société

Les questions éthiques et sociales continueront à nous lancer des défis dans de nouveaux secteurs, notamment le clonage, la manipulation de l'ADN et la génomique. Étant donné que les progrès en science et en technologie offrent des solutions plus générales dans les domaines de la santé, il sera impératif de continuer à intégrer la science dans le processus décisionnel du gouvernement, de l'industrie et des personnes.

Le marché des produits pharmaceutiques est en plein essor, et pour être efficace, le système de santé doit réagir à ce phénomène en veillant à ce que les Canadiens aient accès en temps opportun à des produits de santé, à médicaments, à des aliments et à des renseignements.

Évolution des mentalités et des valeurs en ce qui concerne la santé

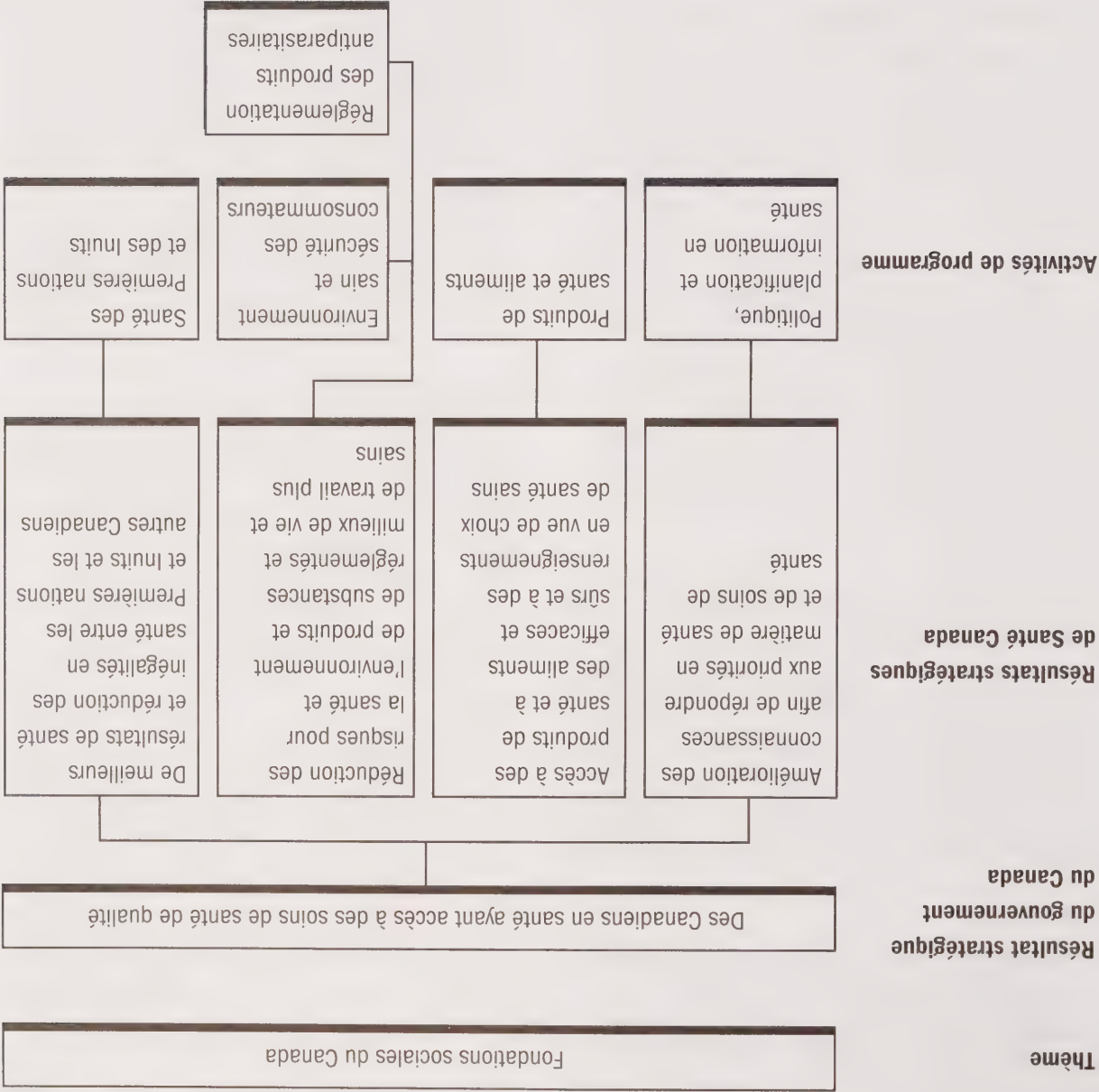
Les Canadiens n'ont plus la même perception de la prestation des soins de santé à mesure qu'ils se voient davantage comme des consommateurs que des patients. Ils peuvent obtenir de l'information sur la

diversifiée sur le plan ethnique et culturel continuera d'accroître pour les demandes pour des thérapies non conventionnelles et la prestation de services.

La technologie se retrouve au quotidien

Les disciplines non traditionnelles, dont la biotechnologie, les transplantations artificielles et la nanotechnologie, offrent un potentiel stimulant pour traiter de nouvelles façons les questions de santé et améliorer considérablement la santé de nombreux Canadiens au cours des prochaines décennies. Les nouvelles technologies continueront à nous stimuler pour intégrer la science réglementaire appropriée au processus décisionnel.

Contribution aux résultats stratégiques du gouvernement du Canada
 Le tableau suivant montre le lien entre les activités de programme de Santé Canada et les résultats stratégiques du gouvernement du Canada, définis par le Secrétariat du Conseil du Trésor du Canada



Principes directeurs

Plusieurs principes directeurs nous guident en ce qui concerne la prestation des programmes et des services, qui nous aident à optimiser notre efficacité dans la réalisation de notre objectif, à savoir d'améliorer et de maintenir l'état de santé des Canadiens. Ces principes directeurs couvrent le vaste éventail des activités de Santé Canada, qui vont de l'analyse approfondie des politiques à la recherche scientifique.

♦ Prise de décision saine et éclairée fondée sur la science de pointe

Afin d'exercer un leadership, d'assurer la cohérence et de fournir une expertise à l'ensemble de l'orientation stratégique de Santé Canada, pour ses responsabilités et activités de nature scientifique, le Ministère a créé le Bureau de l'expert scientifique (BES). Le BES continuera de promouvoir la science dans l'ensemble du Ministère. Pour ce faire, il coordonnera la participation à la recherche et à la réglementation de nature scientifique au Ministère et fournira une expertise scientifique pour les priorités de Santé Canada; il favorisera et facilitera le travail en partenariat; il encouragera et fera connaître la science et la recherche réalisées à Santé Canada; et il veillera à la protection de la propriété intellectuelle.

♦ Utilisation des ressources efficace et durable dans le cadre juridique, éthique et opérationnel

Nous sommes déterminés à assurer une saine gestion financière et à optimiser les ressources dans l'intérêt des Canadiens. Par la création de la nouvelle Direction générale du contrôle ministériel, nous continuerons d'examiner nos processus, afin d'utiliser nos ressources avec le maximum d'efficacité et d'efficience, et de nous conformer aux directives des organismes centraux concernant la reddition de comptes sur la gestion.

♦ Transparence

Nous nous efforçons d'élaborer et d'offrir des programmes et des services de façon ouverte et transparente, qui assurent aux intervenants et à la population une participation concrète à notre travail par l'entremise de consultation de la population et des intervenants.

♦ Collaboration et engagement des provinces, des territoires, des partenaires et des intervenants

Nous sommes déterminés à travailler avec nos partenaires, y compris les gouvernements provinciaux et territoriaux, les Premières nations, les Inuits et d'autres organisations autochtones, les communautés, les associations professionnelles, les groupes de consommateurs, les universités et les instituts de recherche, les organisations internationales, les organismes à but non lucratif, les bénévoles et d'autres ministères et organismes fédéraux.

♦ Engagement dans les questions de santé internationales

L'augmentation de la mobilité mondiale favorise la propagation rapide des maladies partout dans le monde et nous oblige à être des participants actifs au sein de la communauté internationale de la santé. Nous sommes déterminés à tirer des leçons des expériences d'autres pays et de leurs pratiques exemplaires, dans le but de réduire les risques qu'une menace mondiale sur la santé représente pour les Canadiens.

Principaux domaines d'intérêt pour la période de planification

À la lumière du contexte opérationnel actuel, des nouveaux risques pour la santé des Canadiens, et des tendances au sein de la société canadienne, Santé Canada se concentrera sur les principaux domaines stratégiques ci-dessous pour la période de planification 2006-2009 :

- 1 - **Elaboration de la composante de base pour établir la Garantie sur les délais d'attente pour les patients** – Élaborer une approche complète qui nous dotera d'un système de soins de santé accessible à tous et équitable pour répondre aux besoins des Canadiens en santé. Le travail se poursuivra avec les provinces, les territoires et les autres intervenants à partager les pratiques exemplaires et les initiatives novatrices afin d'établir la garantie sur les délais d'attente pour les patients.

- 2- **Avancement du travail de préparation en cas de pandémie mondiale** – Collaborer avec des organismes internationaux, les ministères, les provinces, les territoires et les intervenants, afin que le Canada soit prêt à intervenir en cas de pandémie de grippe.

- 3- **Mise en œuvre de la Stratégie canadienne de lutte contre le cancer** – La lutte contre le cancer est une priorité pour le gouvernement du Canada et Santé Canada collabore avec l'Agence de santé publique du Canada et d'autres organismes pour améliorer le dépistage, la prévention et la coordination, par la mise en œuvre de la *Stratégie canadienne de lutte contre le cancer*. Les objectifs principaux de la Stratégie seront de réduire le nombre de nouveaux cas de cancer au Canada, améliorer la qualité de vie de ceux qui sont atteints de la maladie et de réduire le nombre de morts prématurées attribuables au cancer.

autres pays et l'Organisation mondiale de la Santé pour accroître les efforts de coopération internationale. Nous contribuons déjà activement aux activités de préparation en cas de pandémie, sur les plans des vaccins, des contributions multilatérales, de la santé et sécurité au travail ainsi que des interventions d'urgence dans les communautés des Premières nations et des Inuits.

La santé des Canadiens est liée à la santé de l'environnement. Nous travaillons activement à l'élaboration d'approches intégrées pour mieux évaluer les effets sur la santé et de stratégies pour atténuer les risques connus et nouveaux, par exemple les polluants et les produits chimiques toxiques contenus dans l'air, l'eau, les aliments et les produits. La protection contre les polluants et les produits chimiques et l'amélioration de la santé des populations vulnérables, comme les enfants, les personnes âgées et les Autochtones, bénéficieront à tous les Canadiens. Nous élaborons également des règlements pour protéger la santé des Canadiens et gérer les risques et les avantages des produits de santé et des matériels médicaux. Nous continuons de renforcer notre capacité scientifique, pour être en mesure de bien assumer nos responsabilités de réglementation et surveiller des nouveaux développements.

3. Aider à améliorer l'état de santé de la population canadienne

Bien que la majorité des Canadiens jouissent d'une excellente qualité de vie, tout n'est pas parfait. Santé Canada étudiera et mettra en place de nouveaux moyens pour aider à améliorer l'état des santé Canadiens en collaborant avec les organismes du portefeuille de la Santé et d'autres ministères à l'amélioration de la qualité de vie des Canadiens, but que le gouvernement du Canada s'est fixé. De concert avec l'Agence de santé publique du Canada, nous travaillons à l'avancement des travaux sur le cancer, pour soutenir les efforts des intervenants et améliorer le dépistage et la prévention de cette maladie.

La santé des Autochtones est un sujet de préoccupation majeur. Bien que les Canadiens autochtones vivent plus longtemps, leur état de santé demeure inférieur à celui des autres Canadiens. Notre but, de concert avec les organisations autochtones, les partenaires du portefeuille de la Santé, les autres ministères, et les provinces et territoires, est d'offrir des initiatives, des programmes et des services de santé efficaces en vue d'améliorer l'état de santé des membres des Premières nations et des Inuits.

4. Renforcer la responsabilisation devant le Parlement et le public

Pour répondre adéquatement aux besoins des Canadiens en santé, il faut adopter des pratiques de gestion rigoureuses, qui permettent de livrer des résultats et d'optimiser les ressources. Nous raffermissons notre engagement en matière de responsabilisation, de transparence et de saine gestion des ressources en continuant d'intégrer les principes de la fonction de contrôleur moderne, en améliorant les systèmes et processus opérationnels du Ministère et en nous attaquant aux priorités en ressources humaines. Pour renforcer nos pratiques de gestion, nous allons notamment :

- ◆ resserrer notre gestion des subventions et contributions en nous dotant de structures de gouvernance et de processus administratifs solides;
- ◆ améliorer la gouvernance et le contrôle des contrats utilisant le Cadre de gestion des marchés, basé sur les principes fondamentaux de responsabilités d'obligation de rendre des comptes, de surveillance d'omission et de vérification;
- ◆ renforcer la responsabilisation et l'intendance en améliorant la mesure du rendement et en renouvelant de nos fonctions d'évaluation de programmes;

Santé Canada et ses partenaires aident les Canadiens à faire des choix éclairés et indépendents

La responsabilité de promouvoir, de protéger et d'améliorer l'état de santé des Canadiens n'incombe pas à un ordre de gouvernement en particulier, à la profession médicale ou aux Canadiens eux-mêmes. Elle incombe à une communauté interreliée d'intervenants qui collaborent à l'atteinte de cet objectif.

Tous les jours, les Canadiens font des choix qui touchent leur état de santé et leur bien-être. Il y a aussi des facteurs environnementaux, économiques et sociaux qui se répercutent sur la santé. Les gouvernements municipaux, provinciaux et territoriaux, les fournisseurs de services de santé et les organismes à but non lucratif garantissent des services de santé, communautaire disponibles et offrent le système de soins de santé sur lequel les Canadiens comptent pour protéger et améliorer leur état de santé. Le secteur privé aide à développer des produits pharmaceutiques et d'autres produits de santé pour les Canadiens.

En plus de surveiller l'application de la *Loi canadienne sur la santé*, le gouvernement fédéral évalue les risques pour la santé humaine, soutient les mesures de protection de la santé, réglemente les produits et les approuve, et subventionne les services de santé. Santé Canada offre du leadership et de l'expertise à l'échelle nationale dans l'élaboration des politiques et des sciences de la santé. Le gouvernement fédéral aide les gouvernements provinciaux et territoriaux à offrir les services de soins de santé grâce au Transfert canadien en matière de santé.

En ce qui a trait aux programmes et aux services de santé offerts aux Premières nations et aux Inuits, Santé Canada appuie les programmes de santé publique et de santé communautaire dans les réserves et dans les communautés des Inuits, offre la couverture des soins de santé non assurés sans égard au lieu de résidence et fournit la prestation de services de soins primaires dans les communautés éloignées et isolées pour compléter et soutenir les services offerts par les autorités de santé régionales, territoriales et provinciales.

Priorités de Santé Canada

Étant donné le milieu dans lequel nous fonctionnons, Santé Canada a défini quatre priorités ministérielles afin de répondre aux défis clés et aux possibilités auxquels sont confrontés les Canadiens.

Ces priorités tiennent compte de l'orientation et des engagements du gouvernement du Canada, ainsi que de nos objectifs et des résultats stratégiques prévus, qui sont des avantages durables pour les Canadiens desquels découlent notre mission dans son ensemble d'aider la population canadienne à améliorer et à maintenir son état de santé. Ils représentent les différences que nous souhaitons faire pour les Canadiens. Pour plus d'information sur les résultats stratégiques de Santé Canada, veuillez consulter la section II de ce rapport.

1. Travailler avec d'autres pour accroître l'efficacité et l'efficacité du système de santé financé par l'État

L'établissement d'un système de soins de santé efficient et efficace demeure de façon constante une priorité pour les Canadiens. Santé Canada travaille de près avec les gouvernements provinciaux et territoriaux, les organismes de santé et d'autres groupes d'intervenants pour examiner des moyens inédits d'accroître l'efficacité et l'efficacité d'un système de santé public, accessible à tous et équitable. Nous collaborerons avec les provinces et les territoires à l'élaboration de la composante de base pour établir la Garantie sur les délais d'attente pour les patients afin que les Canadiens reçoivent les soins dont ils ont besoin, quand ils en ont besoin.

2. Réduire les risques pour la santé de la population canadienne

Le Ministère joue un rôle essentiel en matière de protection et de promotion de la santé et de la sécurité des Canadiens.

Une pandémie, de grippe aviaire notamment, présenterait un risque pour la santé des Canadiens et la santé mondiale. Il est donc prioritaire que Santé Canada s'y prépare et qu'il continue de collaborer avec l'Agence de santé publique du Canada, les

Les rôles opérationnels de Santé Canada

Les employés de Santé Canada jouent des rôles clés dans les domaines de la promotion, de la protection et de l'amélioration de l'état de santé des Canadiens, aidant ainsi les autres intervenants qui travaillent dans le domaine.

Innovateurs

À titre de ministère à vocation scientifique, les employés de Santé Canada innovent, mènent des activités scientifiques de pointe, font de la recherche éclairée sur les politiques et se consacrent à l'élaboration efficace de programmes et de services. En se tenant au courant des développements des maladies qui se produisent au plan mondial, Santé Canada a pu jouer un rôle de chef de file quant aux mesures prises au Canada lors de l'éclosion du SRAS, de l'ESB et du virus du Nil occidental.

Courtiers du savoir

Grâce à la recherche, aux évaluations des risques et à la surveillance, Santé Canada offre un savoir aux Canadiens et à d'autres travailleurs dans le domaine des soins de santé pour leur permettre de faire des choix éclairés en ce qui concerne la protection de la santé. De plus, le Ministère surveille et effectue des recherches sur les menaces dans le domaine de la santé que des facteurs environnementaux comme les substances toxiques, la pollution de l'air et de l'eau, les changements climatiques et d'autres menaces présentent pour la santé. Ce travail favorise la prise de décisions et l'élaboration de politiques judicieuses à tous les niveaux afin de réduire les risques pour la santé.

Facilitateur

Dans tous les domaines de programmes, Santé Canada réunit les intervenants et fournit également de l'information, de la recherche et de la formation. Le travail de Santé Canada permet aux Canadiens de se tenir au courant et de se mettre à jour concernant les questions qui touchent leur état de santé.

Administrateurs et coordonnateurs

Santé Canada, par la *Loi canadienne sur la santé*, protège les soins de santé financés par l'État et garantit l'accès universel aux services nécessaires. Les vastes responsabilités en vue de l'application des règlements du Ministère à protéger les Canadiens et à promouvoir la santé et l'étendue de la sécurité vont des médicaments sur ordonnance et des vaccins aux substances toxiques, des stimulateurs cardiaques aux produits de santé naturels et aux aliments, des biens de consommation aux pesticides.

Partisan de la transparence

Toutes les activités à Santé Canada, depuis l'évaluation des produits en vertu de la *Loi canadienne sur la protection de l'environnement* jusqu'à la réglementation et à l'approbation de milliers de produits, s'effectuent de façon transparente. Santé Canada est déterminé à répondre de ses résultats devant les Canadiens. Le public a eu l'occasion de participer à des consultations sur les grandes initiatives de réglementation, comme la nouvelle *Loi sur les produits antiparasitaires*, et continuera d'être consulté sur d'autres sujets, comme le prévoit le cadre des consultations du Ministère.

Notre mission et nos objectifs

Santé Canada a pour mission d'aider les Canadiens et les Canadiennes à maintenir et à améliorer leur état de santé. En conséquence, nous voulons promouvoir et protéger la santé de la population par les moyens suivants :

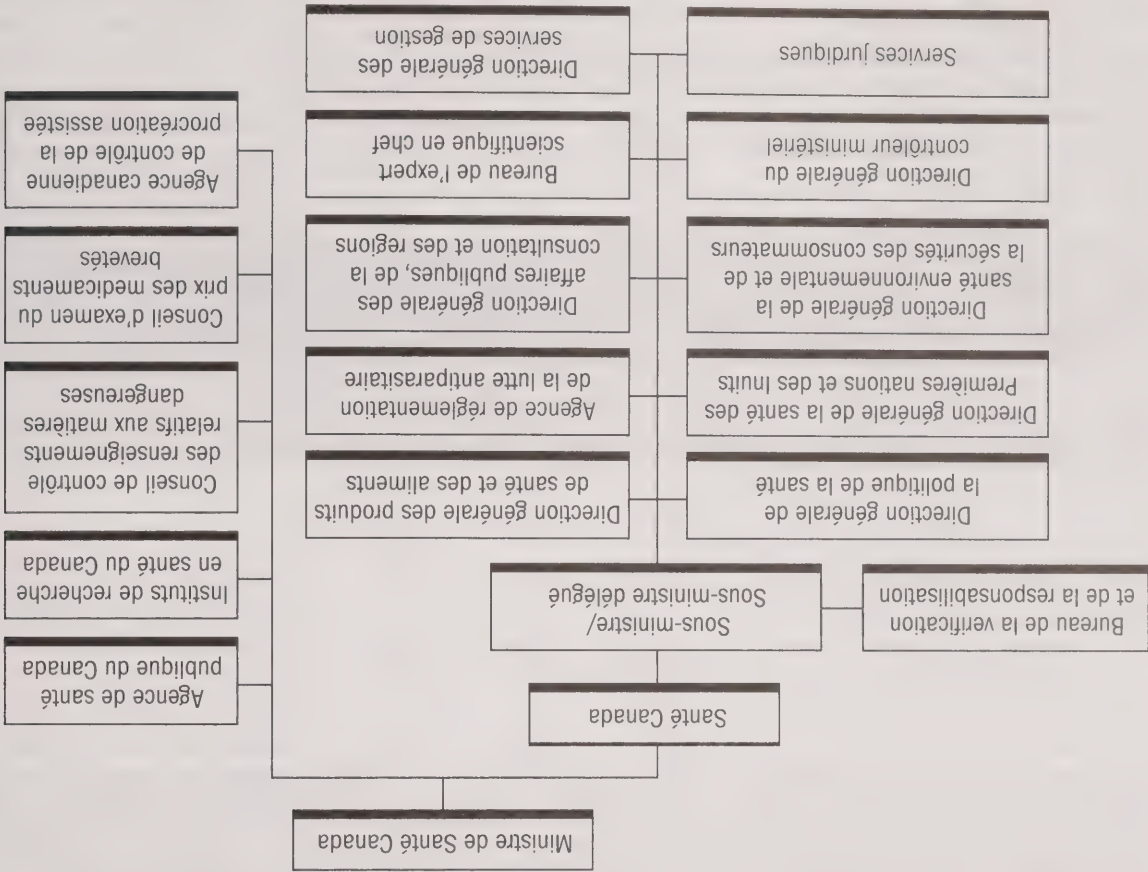
- ◆ Mettre en valeur la viabilité, l'innovation et l'intégration du système de santé;
- ◆ Maintenir la protection et la réglementation de la santé;
- ◆ Participer à la sécurité des milieux et des produits;
- ◆ Faciliter des habitudes de vie saines chez les Canadiens.

Mission				
Aider les Canadiens et les Canadiennes à maintenir et à améliorer leur état de santé				
Mettre en valeur la viabilité du système de santé	Maintenir la protection et la réglementation de la santé	Participer à la sécurité des milieux et des produits	Faciliter des habitudes de vie saines chez les Canadiens	
Priorités du Ministère				
<ul style="list-style-type: none">◆ Travailler avec d'autres pour accroître l'efficacité et l'efficacité du système de soins de santé financé par l'État◆ Aider à améliorer l'état de santé de la population canadienne◆ Réduire les risques pour la santé de la population canadienne◆ Renforcer la responsabilisation devant le Parlement et le public				
Principes directeurs				
<ul style="list-style-type: none">◆ Décisions éclairées fondées sur des activités scientifique de pointe◆ Utilisation efficace et durable des ressources suivant des cadres juridiques, éthiques et opérationnels◆ Transparence◆ Collaboration et engagements avec les provinces, les territoires, les partenaires et les intervenants◆ Engagements dans les questions de santé internationales				
Principaux domaines d'intérêt pour la période de planification				
<ul style="list-style-type: none">◆ Elaboration de la composante de base pour établir la Garantie sur les délais d'attente pour les patients◆ Elaboration d'un plan d'intervention en cas de pandémie◆ Mise en œuvre de la <i>Stratégie canadienne de lutte contre le cancer</i>				
Résultats stratégiques				
Amélioration des connaissances afin de répondre aux priorités en matière de santé et de soins de santé	Accès à des produits de santé et à des aliments efficaces et sûrs et à des renseignements en vue de choix de santé sains	Réduction des risques pour la santé et l'environnement de produits et de substances réglementées et milieux de vie et de travail plus sains	De meilleurs résultats de santé et réduction des inégalités en santé entre les Premières nations et Inuits et les autres Canadiens	

À propos de Santé Canada

Santé Canada élabore, met en œuvre et applique des règlements, des lois, des politiques, des programmes, des services et des initiatives et travaille avec d'autres partenaires fédéraux, les provinces et les territoires pour maintenir et améliorer l'état de santé général de la population canadienne. En sa qualité de gestionnaire de la *Loi canadienne sur la santé*, le Ministère veille au respect des principes qui régissent les soins de santé universels au Canada. La population peut donc avoir confiance dans les services qu'elle reçoit du système de soins de santé. Le ministre de la Santé est également chargé de l'application directe de 18 autres lois, notamment la *Loi sur les aliments et drogues*, la *Loi sur les produits antiparasitaires* et la *Loi réglementant certaines drogues et autres substances*.¹

- Le Ministère offre du leadership stratégique et une coordination avec ses partenaires du portefeuille de la Santé du gouvernement du Canada, dont chacun produit son propre Rapport sur les plans et les priorités, c'est-à-dire :
- ◆ l'Agence de santé publique du Canada;²
 - ◆ les Instituts de recherche en santé du Canada;³
 - ◆ le Conseil de contrôle des renseignements relatifs aux matières dangereuses;⁴
 - ◆ le Conseil d'examen du prix des médicaments brevetés;⁵
 - ◆ l'Agence canadienne de contrôle de la procréation assistée, qui a vu le jour le 12 janvier 2006.⁶



Santé Canada contribue également aux subventions et contributions de plusieurs organismes de santé tels que l'Inforoute, l'Institut canadien d'information sur la santé et la Fondation canadienne de la recherche sur les services de santé.

Priorités du Ministère par résultat stratégique (suite)

Résultat stratégique #3: Réduction des risques pour la santé et l'environnement de produits et de substances réglementées et milieux de vie et de travail plus sains
 Activité de programme: Environnement sain et sécurité des consommateurs

Priorités du Ministère		Dépenses prévues (en millions de dollars)			Résultat prévu
		2006-2007	2007-2008	2008-2009	

Travailler avec d'autres pour accroître l'efficacité et l'efficacité du système de soins de santé financé par l'État (En cours)	Aider à améliorer l'état de santé de la population canadienne (En cours)	112,1	111,6	117,2	◆ Réduire les risques pour la santé et la sécurité et améliorer la protection contre les dommages associés aux dangers en milieu de travail, aux risques environnementaux et aux produits de consommation (y compris les cosmétiques)
	Réduire les risques pour la santé de la population canadienne (En cours)	92,2	91,8	86,7	
	Réduire les risques pour la santé de la population canadienne (En cours)	52,4	49,8	49,2	
	Renforcer la responsabilisation devant le Parlement et le public (En cours)				

Résultat stratégique #3: Réduction des risques pour la santé et l'environnement de produits et de substances réglementées et milieux de vie et de travail plus sains
 Activité de programme: Réglementation des produits antiparasitaires

Priorités du Ministère		Dépenses prévues (en millions de dollars)			Résultat prévu
		2006-2007	2007-2008	2008-2009	

Réduire les risques pour la santé de la population canadienne (En cours)	Renforcer la responsabilisation devant le Parlement et le public (En cours)	11,4	11,0	10,8	◆ Accès à des pesticides plus sécuritaires ◆ Renforcement de la conformité à la LPA et son Règlement ◆ Utilisateurs informés des pratiques à risques réduits ◆ Transparence de la réglementation des pesticides ◆ Amélioration des gains d'efficacité réglementaires et de la rentabilité ◆ Public et intervenants informés
		40,2	40,2	36,3	

Résultat stratégique #4: De meilleurs résultats de santé et réduction des inégalités en santé entre les Premières nations et Inuits et les autres Canadiens
 Activité de programme: Santé des Premières nations et des Inuits

Priorités du Ministère		Dépenses prévues (en millions de dollars)			Résultat prévu
		2006-2007	2007-2008	2008-2009	

Travailler avec d'autres pour accroître l'efficacité et l'efficacité du système de soins de santé financé par l'État (En cours)	Aider à améliorer l'état de santé de la population canadienne (En cours)	1 901,4	1 920,4	1 940,0	◆ Des programmes communautaires renforcés, une meilleure protection de la santé, des soins de santé primaires améliorés et l'accès à des services de santé non assurés contribuent à améliorer l'état de santé des personnes, des familles et des communautés des Premières nations et des Inuits
	Réduire les risques pour la santé de la population canadienne (En cours)	46,9	47,4	47,9	
	Renforcer la responsabilisation devant le Parlement et le public (En cours)	121,2	116,3	115,3	
		49,6	50,1	50,5	

Note : Les chiffres incluent d'autres coûts d'infrastructures ministérielles et régionales appuyant l'exécution des programmes.

1.3 Renseignements sommaires

Raison d'être : Santé Canada a été créé pour aider la population canadienne à maintenir et à améliorer son état de santé. Le Ministère s'est engagé à améliorer la vie de tous les Canadiens et à faire du Canada l'un des pays où les gens sont le plus en santé au monde, comme en témoignent la longévité, les habitudes de vie et l'utilisation efficace du système public de soins de santé.

Ressources financières (millions de dollars)		
2006-2007	2007-2008	2008-2009
3 011,1	2 949,1	2 950,3

Ressources humaines		
2006-2007	2007-2008	2008-2009
8 711	8 773	8 671

Priorités du Ministère par résultat stratégique	
Résultat stratégique #1: Amélioration des connaissances afin de répondre aux priorités en matière de santé et de soins de santé	
Activité de programme: Politique, planification et information en santé	

Priorités du Ministère		Dépenses prévues (en millions de dollars)			Résultat prévu
		2006-2007	2007-2008	2008-2009	
Travailler avec d'autres pour accroître l'efficacité et l'efficacé du système de soins de santé financé par l'Etat (En cours)	Aider à améliorer l'état de santé de la population canadienne (En cours)	20,7	20,6	20,5	♦ Définition de buts et d'objectifs pour des stratégies particulières et des initiatives
	Réduire les risques pour la santé de la population canadienne (En cours)	31,7	33,6	32,3	
	Renforcer la responsabilisation devant le Parlement et le public (En cours)	18,7	17,9	17,7	
Résultat stratégique #2: Accès à des produits de santé et à des aliments efficaces et sûrs et à des renseignements en vue de choix de santé sains	Travailler avec d'autres pour accroître l'efficacité et l'efficacé du système de soins de santé financé par l'Etat (En cours)	217,3	146,1	144,5	♦ Développement et transfert des connaissances des questions stratégiques particulières de santé
	Aider à améliorer l'état de santé de la population canadienne (En cours)				
	Réduire les risques pour la santé de la population canadienne (En cours)				
	Renforcer la responsabilisation devant le Parlement et le public (En cours)				

Priorités du Ministère		Dépenses prévues (en millions de dollars)			Résultat prévu
		2006-2007	2007-2008	2008-2009	

Travailler avec d'autres pour accroître l'efficacité et l'efficacé du système de soins de santé financé par l'Etat (En cours)	Aider à améliorer l'état de santé de la population canadienne (En cours)	7,3	7,3	6,9	♦ Accès à des produits de santé et à des aliments efficaces et sûrs et à des renseignements en vue de choix de santé sains
	Réduire les risques pour la santé de la population canadienne (En cours)	94,7	94,7	89,8	
	Renforcer la responsabilisation devant le Parlement et le public (En cours)	57,7	54,8	54,3	

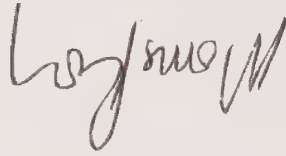
1.2 Déclaration de la direction

Je soumetts, en vue de son dépôt au Parlement, le Rapport sur les plans et les priorités (RPP) de 2006-2007 de Santé Canada.

Le présent document a été préparé conformément aux principes de présentation des rapports énoncés dans le Guide pour la préparation de la Partie III du Budget des dépenses 2006-2007 : Rapports sur les plans et les priorités et Rapports ministériels sur le rendement :

- ♦ Il est conforme aux exigences précises de déclaration figurant dans les lignes directrices du SCT;

- ♦ Il repose sur l'architecture des activités de programme approuvée du ministre figurant dans la Structure de gestion des ressources et des résultats (SGRR);
- ♦ Il présente une information cohérente, complète, équilibrée et fiable;
- ♦ Il fournit une base pour la reddition de comptes à l'égard des résultats obtenus avec les ressources et les autorisations qui lui sont confiées;
- ♦ Il rend compte de la situation financière en fonction des chiffres des dépenses prévues approuvées provenant du Secrétariat du Conseil du Trésor du Canada dans le RPP;

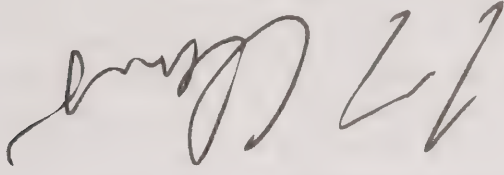


Morris Rosenberg
Sous-ministre de Santé Canada

réduire les écarts entre les Autochtones et les autres Canadiens sur le plan de la santé. La recherche en santé aidera à mieux comprendre les causes, la prévention, le dépistage, le diagnostic, le traitement, les systèmes de soutien et les soins palliatifs, relativement à un large éventail de problèmes de santé. Pour cette recherche, nos populations cibles seront les jeunes et les enfants, les aînés et les peuples des Premières nations et des Inuits. Nous améliorerons également les partenariats et les communications avec les organisations internationales et les autres pays toujours en vue de renforcer le système de santé canadien.

Pour respecter l'engagement de notre gouvernement à l'égard de la responsabilisation et de la démonstration de résultats concrets aux Canadiens, j'ai demandé à Santé Canada de centrer ses efforts sur la gestion axée sur les résultats. Puisque le *Rapport sur les plans et les priorités de 2006-2007* de Santé Canada affiche, pour la première fois, des indicateurs de rendement pour nos programmes et nos services en vue de nous aider à évaluer les progrès accomplis et l'utilisation des ressources, et à en rendre compte, j'attends déjà avec impatience le rapport de l'année prochaine pour montrer les progrès accomplis en ce qui a trait à la reddition de comptes en fonction des résultats. Nous examinerons nos investissements dans les secteurs prioritaires pour nous assurer que nos efforts produisent des résultats concrets qui se traduisent par des améliorations sur le plan de la santé des Canadiens.

Nous avons établi un programme audacieux et ambitieux, ce à quoi les Canadiens s'attendent et méritent de la part de leur gouvernement fédéral. J'ai la certitude qu'avec ces initiatives détaillées, les Canadiens auront un meilleur accès aux services du système de santé et que notre population comptera parmi celles qui jouissent du meilleur état de santé au monde.



Tony Clement

Ministre de la Santé et ministre de l'Initiative fédérale
du développement économique dans le Nord de l'Ontario

publication, plus tard au cours de l'année, de la mise à jour du Guide alimentaire canadien. Nous poursuivrons également nos travaux sur les milieux de vie et de travail plus sûrs ainsi que sur la réglementation des produits pharmaceutiques et leur accès.

L'écllosion du SRAS en 2003 nous a montré que des menaces concernant la santé à l'extérieur de nos frontières pouvaient rapidement constituer d'importants risques pour la santé de notre population. Ces menaces nous préoccupent particulièrement à cause de leur caractère hautement imprévisible et des conséquences catastrophiques qu'elles peuvent avoir. En partenariat avec les provinces et les territoires, les organisations des Premières nations, les experts techniques et d'autres partenaires fédéraux et internationaux, je m'assure que le gouvernement du Canada dispose d'un plan de lutte contre la grippe aviaire et la grippe pandémique chez les humains en vue d'atténuer les effets de telles épidémies sur la population canadienne. Les secteurs d'importance comprendront la planification en cas de grippe pandémique et de grippe aviaire, le renforcement de la capacité de surveillance, la mise à jour de la réglementation concernant la quarantaine et la biosécurité, ainsi que la prévention et le contrôle des maladies infectieuses.

En plus de ces importants secteurs, nous travaillerons sur une panoplie de questions essentielles à la protection de la santé des Canadiens. Nous approfondirons nos connaissances des liens entre la santé et l'environnement, une des principales préoccupations des Canadiens. Santé Canada, en partenariat avec les Premières nations et les Inuits, continuera d'appuyer la prestation durable de services de santé aux membres des Premières nations qui vivent dans les réserves et aux Inuits. Nous chercherons également, de concert avec nos partenaires en santé et d'autres ministères fédéraux, des moyens novateurs de



Je suis très heureux de vous présenter le *Rapport sur les plans et les priorités de 2006-2007* de Santé Canada qui montre les initiatives que le Ministère déploiera au cours des trois prochaines années pour aborder les grandes priorités

gouvernementales dans le domaine de la santé. Je suis honoré de pouvoir travailler au service de la population afin d'assurer au Canada un système de soins de santé public efficace, rentable et de qualité. La population canadienne contribue au système de santé public, et tous les gouvernements ont la responsabilité d'assurer à chaque citoyen, en retour, un accès facile aux services de santé.

Depuis son élection en janvier 2006, notre gouvernement a adopté six principes opérationnels dans son approche de gestion du portefeuille de la Santé : faire passer le patient au premier plan dans les initiatives de prévention et de détection précoce des maladies, faire des investissements stratégiques et fondés sur des données probantes, assurer l'harmonisation des politiques et des programmes au sein du Portefeuille de la Santé, bâtir des relations de partenariat fondées sur la confiance et l'inclusion, améliorer le rendement et assurer l'optimisation des ressources, et renforcer la responsabilisation devant le Parlement et le public. Nous avons déjà montré notre engagement à l'égard de ces principes en étant d'accord à indemniser les Canadiens qui ont contracté le virus de l'hépatite C à partir du sang contaminé avant le 1^{er} janvier 1986 et après le 1^{er} juillet 1990.

À titre de ministre de la Santé, j'ai un large éventail de responsabilités et de priorités à respecter. Les Canadiens ont fait de l'accès aux soins de santé une de leurs grandes priorités; notre gouvernement a répondu en faisant de l'établissement de la garantie sur les délais d'attente pour les patients une de ses cinq grandes priorités. Le gouvernement fédéral respectera cet engagement en collaboration avec les provinces, les

territoires, les intervenants et les autres partenaires. Je suis encouragé par mes collègues des provinces et des territoires qui ont exprimé le désir d'explorer des idées novatrices pour réduire les délais d'attente imposés à la population.

Pour cette raison, Santé Canada collaborera avec les provinces, les territoires et les autres intervenants afin :

1. d'établir d'autres points de repère fondés sur des données probantes pour les délais d'attente dans les secteurs de l'oncologie, de la chirurgie cardiaque, de l'imagerie diagnostique, du remplacement articulaire et de la restauration de la vue;
2. d'encourager l'atteinte des objectifs provinciaux de réduction des délais d'attente pour les interventions prioritaires;
3. de présenter aux Canadiens des rapports périodiques sur les progrès accomplis sur les délais d'attente.

L'établissement de la garantie sur les délais d'attente pour les patients viendra compléter ces efforts et mettre en valeur les réalisations actuelles et futures en assurant aux Canadiens qu'ils recevront les soins nécessaires dans des délais appropriés.

Toujours en lien avec les délais d'attente, nous nous efforcerons de prévenir les maladies et d'améliorer la prise en charge des patients au Canada. À cette fin, nous travaillerons de concert avec l'Agence de santé publique du Canada, les provinces et les territoires à la mise en œuvre de la *Stratégie canadienne de lutte contre le cancer* afin d'améliorer le dépistage et la prévention de cette maladie, en plus de la coordination générale, en collaboration avec les principaux intervenants et organismes de lutte contre le cancer au Canada. Nous concentrerons également nos efforts sur les secteurs des maladies cardiovasculaires et de la santé mentale, pour n'en nommer que quelques-uns. Nous prendrons aussi des mesures pour promouvoir une vie active et une saine nutrition, en commençant avec la

Survival



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**RAPPORT SUR LES
PLANS ET LES PRIORITÉS
DE 2006-2007**

Santé Canada

Les documents budgétaires

Chaque année, le gouvernement établit son budget des dépenses, qui présente l'information à l'appui des autorisations de dépenser demandées au Parlement pour l'affectation des fonds publics. Ces demandes d'autorisations sont présentées officiellement au moyen d'un projet de loi de crédits déposé au Parlement. Le budget des dépenses, qui est déposé à la Chambre des communes par le président du Conseil du Trésor, comporte trois parties :

Partie I – Plan de dépenses du gouvernement

présente un aperçu des dépenses fédérales et résume les principaux éléments du Budget principal des dépenses.

Partie II – Budget principal des dépenses

étaye directement la *Loi de crédits*. Le budget principal des dépenses énonce les autorisations de dépenser (crédits) et les sommes à inclure dans les projets de loi de crédits que le Parlement doit adopter afin que le gouvernement puisse mettre en application ses plans de dépenses. Les Parties I et II du budget des dépenses sont déposées simultanément le 1^{er} mars ou avant.

Partie III – Plan de dépenses du ministère

est divisé en deux documents :

- 1) **Les rapports sur les plans et les priorités (RPP)** sont des plans de dépenses établis par chaque ministère et organisme (à l'exception des sociétés d'État). Ces rapports présentent des renseignements plus détaillés, pour une période de trois ans, sur les principales priorités d'une organisation, et ce, par résultat stratégique, activité de programme et résultats prévus, incluant des liens aux besoins en ressources connexes. Les RPP contiennent également des données sur les besoins en ressources humaines, les grands projets d'immobilisations, les subventions et contributions, et les coûts nets des programmes. Ils sont déposés au Parlement par le président du Conseil du Trésor au nom des ministres responsables des ministères et des organismes qui dépendent des crédits parlementaires et qui sont désignés aux annexes I, I.1 et II de la *Loi sur la gestion des finances publiques*. Ces documents sont habituellement déposés au plus tard le 31 mars, pour renvoi aux comités qui peuvent ensuite faire rapport à la Chambre des communes conformément au paragraphe 81(4) du Règlement.
- 2) **Les rapports ministériels sur le rendement (RMIR)** rendent compte des réalisations de chaque ministère et organisme en fonction des attentes prévues en matière de rendement qui sont indiquées dans leur RPP. Ces rapports sur le rendement, qui portent sur la dernière année financière achevée, sont déposés au Parlement en automne par le président du Conseil du Trésor au nom des ministres responsables des ministères et des organismes qui dépendent des crédits parlementaires et qui sont désignés aux annexes I, I.1 et II de la *Loi sur la gestion des finances publiques*.

Le budget supplémentaire des dépenses étaye directement la *Loi de crédits*. Le budget supplémentaire des dépenses énonce les autorisations de dépenser (crédits) et les sommes à inclure dans les projets de loi de crédits que le Parlement doit adopter afin que le gouvernement puisse mettre en application ses plans de dépenses. Le budget supplémentaire des dépenses est habituellement déposé deux fois par année, soit un premier document au début novembre et un document final au début mars. Chaque budget supplémentaire des dépenses est caractérisé par une lettre alphabétique (A, B, C, etc.). En vertu de circonstances spéciales, plus de deux budgets supplémentaires des dépenses peuvent être publiés au cours d'une année donnée.

Le budget des dépenses, de même que le budget du ministre des Finances, sont le reflet de la planification budgétaire annuelle de l'État et de ses priorités en matière d'affectation des ressources. Ces documents, auxquels viennent s'ajouter par la suite les Comptes publics et les rapports ministériels sur le rendement, aident le Parlement à s'assurer que le gouvernement est dûment comptable de l'affectation et de la gestion des fonds publics.

©Sa Majesté la Reine du chef du Canada, représentée par le ministre des Travaux publics et Services gouvernementaux Canada, 2006

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Santé Canada

Budget des dépenses
2006-2007

Partie III – Rapport sur les plans et les priorités



Human Resources and Social Development Canada

2006-2007
Estimates

Part III – Report on Plans and Priorities

Canada



The Estimates Documents

Each year, the government prepares Estimates in support of its request to Parliament for authority to spend public monies. This request is formalized through the tabling of appropriation bills in Parliament. The Estimates, which are tabled in the House of Commons by the President of the Treasury Board, consist of:

Part I – The Government Expense Plan provides an overview of federal spending and summarizes the key elements of the Main Estimates.

Part II – The Main Estimates directly support the *Appropriation Act*. The Main Estimates identify the spending authorities (votes) and amounts to be included in subsequent appropriation bills. Parliament will be asked to approve these votes to enable the government to proceed with its spending plans. Parts I and II of the Estimates are tabled concurrently on or before March 1.

Part III – Departmental Expenditure Plans, which is divided into two components:

- 1) **Reports on Plans and Priorities (RPPs)** are individual expenditure plans for each department and agency (excluding Crown corporations). These reports provide increased levels of detail over a three-year period on an organisation's main priorities by strategic outcome(s), program activity(s) and planned/expected results, including links to related resource requirements. The RPPs also provide details on human resource requirements, major capital projects, grants and contributions, and net program costs. They are tabled in Parliament by the President of the Treasury Board on behalf of the ministers who preside over the appropriation dependent departments and agencies identified in Schedules I, I.1 and II of the *Financial Administration Act*. These documents are usually tabled on or before March 31 and referred to committees, which may then report to the House of Commons pursuant to Standing Order 81(4).
- 2) **Departmental Performance Reports (DPRs)** are individual department and agency accounts of results achieved against planned performance expectations as set out in respective RPPs. These Performance Reports, which cover the most recently completed fiscal year, are tabled in Parliament in the fall by the President of the Treasury Board on behalf of the ministers who preside over the appropriation dependent departments and agencies identified in Schedules I, I.1 and II of the *Financial Administration Act*.

Supplementary Estimates directly support an *Appropriation Act*. The Supplementary Estimates identify the spending authorities (votes) and amounts to be included in the subsequent appropriation bill. Parliamentary approval is required to enable the government to proceed with its spending plans. Supplementary Estimates are normally tabled twice a year, the first document in early November and a final document in early March. Each Supplementary Estimates document is identified alphabetically A, B, C, etc. Under special circumstances, more than two Supplementary Estimates documents can be published in any given year.

The Estimates, along with the Minister of Finance's Budget, reflect the government's annual budget planning and resource priorities. In combination with the subsequent reporting of financial results in the Public Accounts and of accomplishments achieved in Departmental Performance Reports, this material helps Parliament hold the government to account for the allocation and management of public funds.

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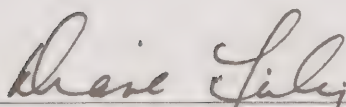
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HUMAN RESOURCES AND SOCIAL DEVELOPMENT CANADA

**2006-2007
Estimates**

A Report on Plans and Priorities

Approved by:



The Honourable Diane Finley, P.C., M.P.
Minister of Human Resources and Social Development



The Honourable Jean-Pierre Blackburn, P.C., M.P.
Minister of Labour

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MINISTERS' MESSAGES



Human Resources and Social Development's portfolio is one of the most dynamic and diverse in the federal government, touching the lives of Canadians in many ways. The Department's programs, policies and partnerships, open up new opportunities, and deliver services that help Canadians across the country reach their full potential. By doing this, the Department contributes to building a more competitive and prosperous Canada.

I believe that supporting the economic and social well-being of children and their families, seniors, people with disabilities, and others facing social challenges; building capacity in our communities, private and voluntary sectors, including support for communities capacity to address issues of housing and homelessness; promoting the Canadian labour force, and nurturing our learning environment are fundamental to the success of our country in the 21st century and beyond.

On January 23, Canadians elected a new Government. Canada's new Government has been clear and focused on its five priorities: accountability, lower taxes, crime, child care, and health care. Budget 2006 set out how this Government and this Department will deliver significant support for children and families, invest in skills and learning, and commit to consult with provinces and territories, citizens and stakeholders. I am very proud to have been mandated with such an integral part of the Government's priority agenda. This report presents our objectives, the initiatives and activities that will enable us to achieve those objectives, and the results that we expect to achieve in 2006-2007.

I will continue to work closely with the Honourable Jean-Pierre Blackburn in his capacity as the Minister of Labour and with Mrs. Lynne Yelich in her capacity as Parliamentary Secretary. I am also eager to work with all of our partners, including provinces, territories and stakeholders to achieve results that help Canadians.

One of our goals is to improve the delivery of programs and services through Service Canada. Canadians have been very clear: they want services that are easy to find, access and use. They also expect prompt, personal and courteous assistance from people who know the answers to their questions. Service Canada is about superior service, simplicity and choice. We are focused on making this a reality for the benefit of all Canadians.

Through our dedicated and principled work, we will ensure that we meet the highest standards of integrity, effectiveness and accountability in serving the public.

Canada is a prosperous nation. Our efforts will be focused on helping to maintain this prosperity now and into the future.

*The Honourable Diane Finley, P.C., M.P.
Minister of Human Resources and Social Development*



The Labour Program contributes to the social and economic well-being of all Canadians. It plays an important leadership role in the working lives of Canadians by ensuring that Canada's workplaces are healthy, safe, fair, stable and cooperative and productive.

The Labour Program is also playing a leadership role in promoting fundamental labour rights internationally, which supports equitable growth and social stability in developing countries.

A healthy workplace is good for workers, their families, employers and the economy. The Labour Program promotes safe and healthy workplaces through consultation, research, information sharing, and cooperation and collaboration on joint projects among jurisdictions when appropriate.

Our commitments focus on collective bargaining, dispute resolution services, fire protection services, health and safety, labour standards, employment equity, international labour cooperation as well as other workplace concerns such as the formulation of labour policy and the provision of labour-related information.

The Labour Program is responsible for administering two fundamental pieces of legislation that contribute to Canada's development of fair, safe and representative workplaces - the *Canada Labour Code* and the *Employment Equity Act*. Important commitments for the coming year are the review of Part III (Labour Standards) of the *Canada Labour Code* and the introduction of the Wage Earner Protection Program. Our goal is to modernize federal labour legislation to be more in line with the needs of employees and employers in today's economy and help protect workers who are most vulnerable in a bankruptcy.

I will continue to work with the Honourable Diane Finley, the Minister of Human Resources and Social Development, and my colleagues, in order to build a more competitive and prosperous Canada.

Canada is a prosperous nation with unlimited potential. The benefits of the 21st century are enormous - with the best yet to come.


*The Honourable Jean-Pierre Blackburn, P.C., M.P.
Minister of Labour*

Management Representation Statement

I submit, for tabling in Parliament, the *2006-2007 Report on Plans and Priorities* for Human Resources and Social Development.

This document has been prepared based on the reporting principles contained in the *Guide to the Preparation of Part III of the Estimates: Reports on Plans and Priorities*.

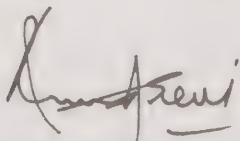
- It accurately portrays the organization's plans and priorities. It is comprehensive and accurate.
- It adheres to the specific reporting requirements outlined in the Treasury Board Secretariat guidelines.
- The Department's plans and priorities are based on the 2007-2008 approved Program Activity Architecture (PAA); however for comparison purposes the Department presents its financial information using the 2006-2007 approved Program Activity Architectures for Human Resources and Skills Development Canada and Social Development Canada.
- It provides a basis of accountability for the results achieved with the resources and authorities entrusted to it.
- It reports finances based on approved planned spending numbers from the Treasury Board Secretariat.



Janice Charette
Deputy Minister
Human Resources and Social Development

Management Representation Statement

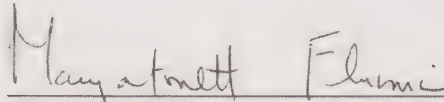
The plans, priorities, planned spending and performance measures in support of the Labour program are accurately presented in the *2006-2007 Report on Plans and Priorities* for Human Resources and Social Development Canada.



Munir A. Sheikh
Deputy Minister of Labour and Associate Deputy Minister
of Human Resources and Social Development

Management Representation Statement

The plans, priorities, planned spending and performance measures in support of Service Canada are accurately presented in the *2006-2007 Report on Plans and Priorities* for Human Resources and Social Development.



Maryan Tonett Flumian

Deputy Head of Service Canada and Associate Deputy Minister
of Human Resources and Social Development



HUMAN RESOURCES AND SOCIAL DEVELOPMENT CANADA OVERVIEW

INTRODUCTION

The Department of Human Resources and Social Development Canada (HRSDC) was created on February 6, 2006, through the consolidation of the former Departments of Human Resources and Skills Development and Social Development. HRSDC has a broad social and economic mandate, which affects every Canadian. The Department is responsible for providing Canadians with the tools to thrive and prosper in the workplace through access to learning and training opportunities, safe and productive working conditions and labour-management relations, as well as for policies, programs and services that support the social well-being of individuals, families and communities, and their participation in society and the economy.

HRSDC's vision is a strong and competitive Canada that enables individuals to make choices that help them live productive and rewarding lives.

To this end, the Department develops policies that make Canada a society in which all can participate and that ensures that individuals can use their talents, skills and resources to benefit the entire country. The Department creates programs and supports initiatives that help Canadians invest in themselves and move through life's transitions – from families with children to seniors, from school to work, from one job to another, from unemployment to employment, and from the workforce to retirement – and delivers citizen-centred service with integrity, commitment and excellence.

Human Resources and Social Development

HRSDC has over 24,000 employees in the National Capital Region and in regional offices across the country, including more than 20,000 assigned to Service Canada.

To deliver on its mandate, HRSDC provides programs and services to millions of Canadians both as citizens and workers. HRSDC provides income support to Canadians through program benefits that Parliament has legislated, such as the Old Age Security program and the full range of benefits from the Canada Pension Plan. In addition, Employment Insurance delivers temporary income support to unemployed Canadians as well as employment programs and services that enable Canadians to prepare for, find and keep employment.

HRSDC promotes lifelong learning by encouraging workplace skills development in Canadian workplaces, and by developing and disseminating data, information, and knowledge about the labour market. The Department also invests in learning by facilitating access to financial assistance for post-secondary education and adult learning opportunities, and promotes learning by supporting programs that address reducing non-financial barriers to adult learning and literacy and early childhood development.

HRSDC's social policies, programs and initiatives help to ensure that children and their families, seniors, people with disabilities, and others facing social challenges have the support, knowledge, and information they need to maintain their well-being and facilitate their participation in society and the workplace. For example, the new Universal Child Care Benefit will provide choice and flexibility to individuals and families in a way that reflects their different needs and circumstances. The Canada Child Tax Benefit will help eligible families with the cost of raising children and the Universal Child Care Benefit will assist Canadian families as they seek to balance work and family life by supporting their child care choices through direct financial support.

HRSDC promotes and sustains stable industrial relations and safe and effective workplaces within the federal labour jurisdiction. The Department also fosters constructive labour-management relationships, carries out labour-related research, and negotiates and implements trade-related international labour agreements.

Ensuring Canadians have the tools they need to participate fully in the knowledge-based economy and labour market requires the active participation of a multitude of partners with the Department acting as a catalyst. Cooperation with provinces and territories is required, given the shared responsibility for many of the Department's programs and policies. HRSDC works closely with its provincial and territorial partners, building on established relationships through multilateral and bilateral forums. Employers and unions have an important role in workplace skills investments. Promoting socio-economic well-being also involves working in partnership with the voluntary sector and not-for-profit organizations, learning partners, community groups, including official language minority communities, and the private sector to develop integrated programs and provide information and services to Canadians. HRSDC works with numerous international partners to learn and share best practices and approaches to maximizing participation of Canadians in economic and social development.

Service Canada

Service Canada provides a single-window point of contact for citizens to obtain services from the federal government. The initiative builds on what Canadians have told government they want and on the experiences of "best practices" in service excellence in Canada and around the world. The experiences in other jurisdictions demonstrate that the Service Canada model has a proven track record. Service Canada also builds on over a decade of work within the Government of Canada to improve the delivery of services to Canadians.

Service Canada has been delivering a growing number of services and benefits on behalf of federal departments and agencies and providing Canadians with increased choice and access. Today, the Service Canada delivery network brings together 433 points of service in communities throughout Canada; a national 1 800 O-Canada telephone service providing Canadians with information about all federal government services and 23 other networked call centres; and, a range of on-line services at <http://www.servicecanada.gc.ca/en/home.html>

Service Canada is partnering with a number of federal departments and agencies to deliver service on their behalf and is identifying further opportunities to partner with other departments and agencies, other levels of government and community partners to strengthen the quality of service for Canadians and the cost-effectiveness of programs and services. Significant progress has been made to improve service experience and will continue, through an expanded in-person service network, an integrated call centre network encompassing a broad range of service, as well as use of on-line applications.

Strategic Outcomes

HRSDC's programs and services are designed to achieve results across a broad range of social and labour market outcomes. Five strategic outcomes form the structure for reporting plans, priorities and resources in this report:

- Policies and programs that meet the human capital and social development needs of Canadians
- Enhanced Canadian productivity and participation through efficient and inclusive labour markets, competitive workplaces and access to learning
- Safe, healthy, fair, stable, cooperative, productive workplaces and effective international labour standards

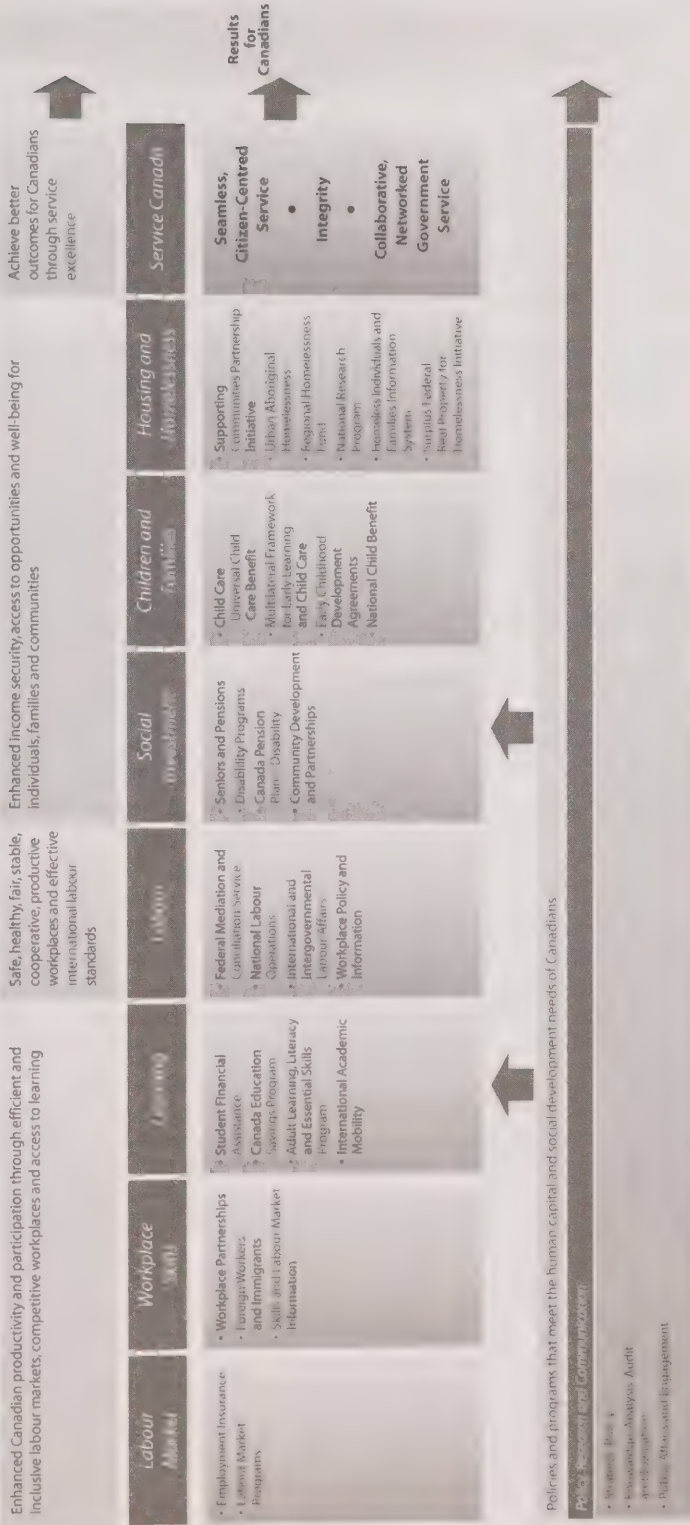
- Enhanced income security, access to opportunities and well-being for individuals, families and communities
- Achieve better outcomes for Canadians through service excellence

The following Program Activity Architecture (PAA) diagram is a graphic of the new Department. Modifications to the PAA at the strategic outcome and program activity level are described below. Those that occur at the sub and sub-sub activity level are described in *Analysis of Plans, Priorities and Program Activities by Strategic Outcome*, under each program activity. A summary cross-walk can be found under *Other Points of Interest*.

DEPARTMENT OF HUMAN RESOURCES AND SOCIAL DEVELOPMENT • PROGRAM ACTIVITY ARCHITECTURE

Vision: A strong and competitive Canada that enables individuals to make choices that help them live productive and rewarding lives.

Mission: Develop policies that make Canada a society in which all can participate and that ensures that individuals can use their talents, skills and resources to benefit the entire country. The Department creates programs and supports initiatives that help Canadians invest in themselves and move through life's transitions – from families with children to seniors, from school to work, from one job to another, from unemployment to employment, and from the workforce to retirement – and delivers citizen-centred service with integrity, commitment and excellence.



Modifications to the 2005-2006 Program Activity Architecture

Policy and program support functions have been grouped to form the new program activity – Policy, Research and Communication. This program activity supports the achievement of the new strategic outcome: “policies that meet the human capital and social development needs of Canadians”.

Three program activities – Labour Market, Workplace Skills and Learning – have been grouped to support achievement of the strategic outcome: “enhanced Canadian productivity and participation through efficient and inclusive labour markets, competitive workplaces and access to learning”.

Two former program activities – Employment Insurance Benefits and Employment Programs – have been combined and now form the new program activity – Labour Market.

Three program activities – Social Investment, Children and Families, and Housing and Homelessness – have been grouped and now support achievement of the strategic outcome: “enhanced income security, access to opportunities and well-being for individuals, families and communities”.

The former program activity – Social Investments – has been split into two program activities – Social Investment, and Children and Families.

The Service Delivery outcome is now supported by three program activities, reflecting the broader mandate of Service Canada:

1. Seamless, Citizen-Centred Service
2. Integrity
3. Collaborative, Networked Government Service

MANDATE

On February 6, 2006, by means of a series of Orders in Council, made pursuant to the *Public Service Rearrangement and Transfer of Duties Act*, the control and supervision of the federal public administration within Social Development Canada was transferred to the Department of Human Resources and Skills Development. The powers, duties and functions of the Minister of Social Development were transferred to the Minister of Human Resources and Skills Development, and the Minister was styled as Minister of Human Resources and Social Development. This Minister was also made responsible for the Canada Mortgage and Housing Corporation.

Until new departmental legislation comes into force, the Minister will rely on the provisions of the *Department of Human Resources and Skills Development Act* and the *Department of Social Development Act* for specific authorities.

The *Department of Human Resources and Skills Development Act* defines the powers, duties and functions of the Minister of HRSDC, the Minister of Labour, and of the Canada Employment Insurance Commission. The mandate of HRSDC is to improve the standard of living and quality of life of all Canadians by promoting a highly skilled and mobile labour force and an efficient and inclusive labour market. The Minister of HRSDC has overall responsibility for the employment insurance system, while the administration of the *Employment Insurance Act* is the responsibility of the Canada Employment Insurance Commission.

The *Department of Human Resources and Skills Development Act* provides for the appointment of a Minister of Labour who is responsible for the *Canada Labour Code* and the *Employment Equity Act*, as well as other legislation on wages and working conditions. The departmental statute provides that the Minister of Labour make use of the services and facilities of the Department. The Act also sets out the mandate of the Minister of Labour to promote safe, healthy, fair, stable, cooperative and productive workplaces.

The *Department of Social Development Canada Act* defines the powers, duties and functions of the Minister of Social Development Canada (SDC). The mandate of SDC is to promote social well-being and security. In exercising the power and performing the duties and functions assigned by this Act, the Minister is responsible for the administration of the *Canada Pension Plan*, the *Old Age Security Act*, and the *National Council of Welfare*, and the *Universal Child Care Benefit Act*, among other tasks.

Service Canada operates within the legislative mandate and framework of the current departmental legislation (*Department of Human Resources and Skills Development Act* and the *Department of Social Development Act*). Its mandate is to work in collaboration with federal departments, other levels of government and community service providers to bring services and benefits together in a single service delivery network. Although Service Canada does not exist as a distinct legal entity, it has delegated authorities to execute its mandate and functions.

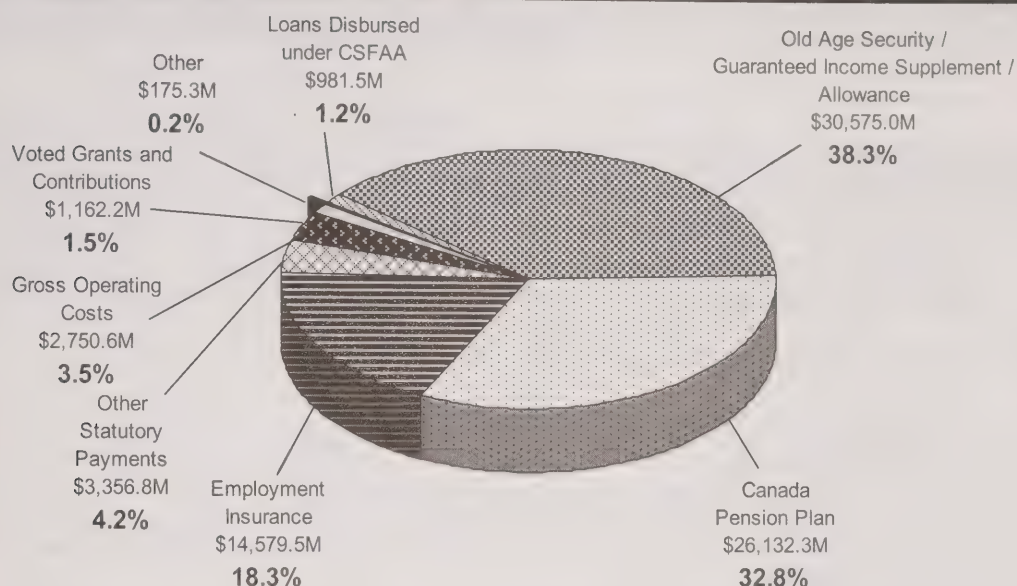
EXPENDITURE PROFILE

Human Resources and Social Development Canada (HRSDC) includes resources of the former Human Resources and Skills Development and the former Social Development departments. This newly created Department has planned expenditures on programs and services of more than \$79 billion, of which \$75 billion, or almost 95%, directly benefits Canadians through Employment Insurance (EI), the Canada Pension Plan (CPP), Old Age Security (OAS), loans disbursed under the *Canada Student Financial Assistance Act* and other statutory transfer payments. The Department has planned spending of \$1.2 billion in voted grants and contributions; \$33.9 billion in statutory grants and contributions; and, \$2.1 billion for Employment Insurance Part II.

The financial strategy for Service Canada establishes that statutory funds, including Employment Insurance, CPP, OAS and voted grants and contributions related to the delivery of specified programs will be allocated annually by HRSDC.

2006-2007 Planned Expenditure Profile

CONSOLIDATED TOTAL: \$79,713.2M



HUMAN RESOURCES AND SOCIAL DEVELOPMENT CANADA – GROSS EXPENDITURES

<u>Budgetary</u>			
Net Operating Costs		1,014.5	
Add Recoveries in relation to:			
Canada Pension Plan	246.8		
Employment Insurance Account	1,411.9		
Workers Compensation	77.4	1,736.1	
Gross Operating Costs		2,750.6	
Voted Grants and Contributions		1,162.2	
Total Gross Expenditures		3,912.8	

Other – Workers' Compensation and EI/CPP Charges and Recoveries	175.3
---	--------------

<u>Non-Budgetary</u>	
Loans disbursed under <i>Canada Student Financial Assistance Act</i> (CSFAA)	981.5

STATUTORY TRANSFER PAYMENTS

Grants and Contributions:	
Old Age Security programs	30,575.0
Other Statutory Payments:	
Canada Student Loans	399.6
Canada Education Savings Grant	575.0
Canada Learning Bond	45.0
Wage Earner Protection Program	28.7
Universal Child Care Benefit	1,610.0
Child Care - Prov./Terr. Agreements	650.0
Others	0.2
Sub-Total	33,883.5
Canada Pension Plan benefits	26,132.3
Employment Insurance benefits	
Part I	12,442.0
Part II	2,137.5
	14,579.5
Other Specified Purpose Accounts	48.3^a
Total Statutory Transfer Payments	74,643.6

^a This amount includes payments related to Government Annuities Account and Civil Service Insurance Fund.

The table below reflects the combined planned financial and human resources for the departments of Human Resources and Skills Development and Social Development.

TABLE 1: HUMAN RESOURCES AND SOCIAL DEVELOPMENT CANADA – FINANCIAL AND HUMAN RESOURCES			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Operating Expenditures (gross)	2,750.6	2,695.8	2,679.8
Non-Statutory Grants and Contributions	1,162.2	1,085.7	1,004.6
Statutory Grants and Contributions	33,883.5	35,257.3	36,731.0
Total Gross Expenditures	37,796.3	39,038.8	40,415.4
Loans disbursed under the <i>Canada Student Financial Assistance Act</i>	981.5	769.1	560.8
CPP Benefits	26,132.3	27,496.9	28,917.7
EI Part I - Income Benefits	12,442.0	13,058.0	13,661.0
EI Part II - Employment Benefits and Support Measures	2,137.5	2,143.1	2,143.6
Government Annuities and Civil Service Insurance Payments	48.3	45.4	42.7
Total	79,537.9	82,551.3	85,741.2
Other Departmental Costs			
EI Doubtful Accounts	57.0	60.0	62.0
EI Administration Costs - Other Government Departments	64.6	67.5	62.5
CPP Administration Costs - Other Government Departments	131.1	132.8	133.9
Workers' Compensation Recoveries	(77.4)	(78.4)	(80.4)
Consolidated Total	79,713.2	82,733.2	85,919.2
Human Resources			
Full Time Equivalents	24,274	23,661	23,513

PLANNING OVERVIEW

The Social and Economic Environment

The future of human and social development policies, programs and services in Canada will be influenced by many forces, and there will be many individuals, organizations and governments engaged in helping shape this future. All will need to take stock of at least these factors: globalization, technological change in a knowledge-based society, demographic change, standard of living and quality of life.

Globalization

Today's globalized world influences Canada's economic and social make-up. Growing international trade, emerging economies such as those of China and India, the increasing mobility of goods and individuals, and new communications technology make the world seem smaller than ever, presenting new opportunities and challenges for Canada and its people.

The benefits of globalization include a greater pool of potential customers for Canadian goods and services, as well as more sources for the purchase of goods and services from abroad. On the other hand, globalization also means increased domestic and international competition.

The impact of globalization on the labour market is evident. Although the employment rate has been high in recent years, employment in the manufacturing sector has resumed its long-term downward trend, representing a decreasing share of total employment and shedding nearly 85,000 workers in 2005. In part, this reflects the strong appreciation of the Canadian dollar compared to the American dollar in the past few years, and the influence of developing economies. On the other hand, capital investments in the production and export of energy, mostly in oil sands extraction, as well as investments made in preparation for the 2010 Olympic and Paralympic Winter Games in Vancouver, are contributing to net job growth and strong labour markets in the Western provinces.

Large-scale changes affect communities that strongly depend on traditional employers or industries. Locally-based enterprises are being pressed to respond to globalization pressures by changing the way they operate.

Overall, however, Canada is expected to remain in good socio-economic health in the coming years. A strong labour market, low unemployment rate, good social capital, and sustainable institutions (e.g., families, schools) are all increasingly becoming linked to our relationship with other countries that provide the impetus for the labour market, Canadian families, and sometimes whole communities to adjust.

Technological Change and the Knowledge-Based Society

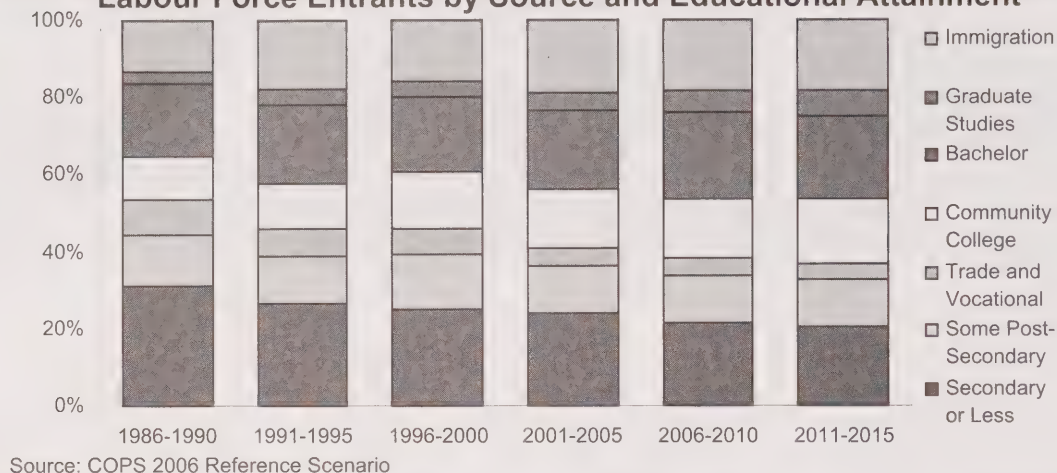
Technological change continues to transform the way Canadians live and work. The knowledge-based economy has direct consequences on the skills and knowledge required of Canadians, and on their engagement in lifelong learning.

Striking a balance between the skills that youth and immigrants bring to the labour market and the future requirements of employers is essential. About two thirds of new jobs that will become available in Canada over the next ten years will be in management or require some form of post-secondary

education. This gradual increase in skills requirements will be generally matched by an increase in the educational attainments of potential workers, since about two thirds of new labour force entrants will have trade certificates, college diplomas or university degrees (Figure 1).

FIGURE 1

Labour Force Entrants by Source and Educational Attainment



To meet labour market demand for skilled workers and to compensate for the emigration of skilled workers to other countries, improvement in the integration of workers with degrees and diplomas from abroad is required. Recent studies suggest that a 1 percent increase in adult literacy scores would be expected over time to generate a 2.5 percent overall rise in labour productivity and a 1.5 percent rise in per capita GDP. This argues strongly in favour of more substantial efforts to encourage adult learning, including literacy and learning.¹

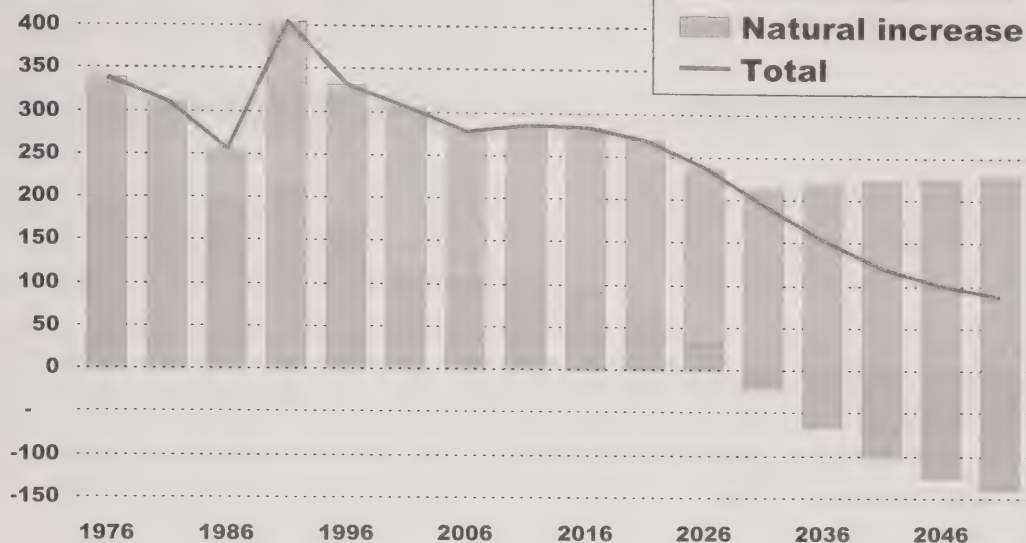
Advancements in information and communication technology have provided industry and government with a medium for innovation in service delivery. Intelligent use of the Internet and information technologies can streamline costs and enhance the way government serves Canadians.

Although technology has the potential to advance social and economic objectives, this can only be achieved through the collaboration of all stakeholders – individuals, governments, community organizations and industry. Access to the internet must also be considered.

Demographic Change

Canada's demographic profile will be heavily influenced by low fertility rates and increasing life expectancy. Population growth in Canada has slowed in recent years and the trend is likely to continue in the foreseeable future (Figure 2).

¹ Serge Coulombe, Jean-François Tremblay and Sylvie Marchand, *Literacy Scores, Human Capital and Growth Across Fourteen OECD Countries*, 2004.

FIGURE 2**Population Growth in
thousands**

Canada's population growth is increasingly dependent upon immigration. Between 1991 and 2001, an average of 220,000 persons immigrated to Canada annually. Visible minorities now make up 13.4 percent of the population, and projections are that this will increase to 20 percent by 2017.² Many immigrants are foreign-trained workers, who are coming from a wider and changing range of countries.

The increase in Canada's natural population (the number of births less deaths) continues to decline, and immigration, which has now become the main source of population growth, will not be sufficient to reverse this trend to meet future labour market needs.

In the past, the economy has benefited greatly from an expanding labour force and continuous increases in the employment rate. In the absence of these factors, Canada will have to rely increasingly on labour productivity growth to raise its standard of living. This trend will be exacerbated by the impending retirement of the baby boom generation. Seniors constitute the fastest-growing age cohort in Canada; the percentage of the population over 65 is projected to rise from 13 percent in 2005 to nearly 24 percent in 2031.³ While there are signs that Canada will adapt to increased pressures on its health system and public pensions, one challenge that may remain is how to foster greater participation and inclusion of seniors in their communities.

Other demographic trends involve the Aboriginal community and the changing nature of Canadian families. In 2001, there were just over one million Aboriginal people in Canada, comprising 3.4 percent of the population. The fertility rate of Aboriginal people is about 1.5 times greater than that of the general population. By 2017, the national proportion of Aboriginal people will increase slightly to 4.1 percent.

² Statistics Canada Demography Division, *Population Projections of Visible Minority Groups. Canada, Provinces and Regions 2001-2017*, Cat No. 91-541-XIE, 2005.

³ Statistics Canada, *Population Projections for Canada, Provinces and Territories (2005 – 2031)*, Cat No. 91-520-XIE, 2005.

Over the past 45 years, family composition has evolved to include new definitions of association, including a greater-than-ever number of non-marital partnerships (Table 1). People are more likely to separate or divorce now than in the past. Fertility rates have dropped, child birth is being delayed until mothers are older, and more children today are born to unmarried parents. More children and adults than ever belong to lone-parent or blended families.

TABLE 1: INDICATORS OF FAMILY DIVERSIFICATION

	1961	1981	1991	2002
Total fertility rate (average births per woman)	3.8	1.7	1.7	1.5
Median age at first marriage				
Brides	21.1	22.5	25.1	27.0
Grooms	24.0	24.6	27.0	29.0
Divorces per 100,000 married couples	180	1180	1235	1050
Common-law couples as percentage of all couples	—	6.4	11.2	16.4
Percentage of children born outside of marriage	4.5	16.7	28.6	36.6
Births to women aged 30+ as percentage of all births	34.1	23.6	36.0	47.4
Lone-parent families as percentage of all families with children	11.4	16.6	20.0	25.0

Source: Beaujot, R., and Kerr, D. (2004). *Population Change in Canada*. Toronto: Oxford University Press.

Standard of Living

Overall, Canada's economic, labour market and social environments are healthy and prospects for the coming years are positive. Canada ranked fourth out of 177 countries in the 2004 *United Nations Human Development Index*, a broad measure that includes several social and economic outcomes. Gross Domestic Product (GDP) per capita ranked in the top tier of the Organization for Economic Co-operation and Development (OECD) countries (2004), employment growth since 2000 has outpaced that of Canada's G-7 partners, and Canada has one of the most educated populations in the world. Canada's strong economic and labour market performance has increased the level of income of Canadians and decreased rates of low income.

Since the mid-1990s, Canada has experienced vigorous economic growth and the gains Canadians have made in their standard of living have come in no small part from an increased employment rate. In 2005, Canada saw employment grow by nearly 223,000, keeping the employment rate (the share of the population 15 years of age or over that is working) at 62.7 percent, the highest level on record. As a result, there has been an increase since the mid-1990s in the proportion of total population employed; in 2005, half the population was employed.

In addition, GDP increased by 2.9 percent in 2005 in real terms, at the same rate as in 2004, and a similar increase is expected in 2006 and 2007.⁴ Canada's labour market is expected to continue to do well in coming years, and the unemployment rate is likely to keep declining. Conversely, labour productivity growth in the Canadian business sector has slowed considerably since 2000, coming to a halt in 2003 – 2004 before rebounding slightly to about one percent in 2005. The Bank of Canada estimates that it will soon return to near its trend growth rate of 1.7 percent annually.⁵

⁴ Finance Canada, *The Economic and Fiscal Update*, November 2005, p. 38.

⁵ Bank of Canada, *Monetary Policy Report*, October 2005, pp: 15.

Recent years have witnessed *continued* improvements in the income of Canadians. Median after-tax income rose for most Canadian families in 2004, as strong economic growth fostered gains in employment, which in turn boosted labour market income. Canadian families with two or more members had a median income after tax of \$54,100, an increase of approximately 2 percent over 2003, after adjusting for inflation. The increase in after-tax income was not shared by all family types. Among “elderly” families, median after-tax income remained virtually unchanged as it also did for “unattached individuals” or single people.

Quality of Life

Quality of life relates to the well-being of individuals, within their families and within their communities. It covers more than material well-being and extends to the social, civic and cultural realms. Overall, Canada has maintained an international reputation for maintaining a high quality of life for its citizens.

Nevertheless, an estimated 684,000 Canadian families were living in low-income households in 2004 — 7.8 percent of total families, down from 8.5 percent in 2003. In spite of the overall improvements in income levels, five groups of Canadians remain at higher risk of experiencing low income, in large part because they often face long and/or frequent spells of unemployment and low-paid work, and tend to have lower education and skill levels. They are:

- lone parents with at least one child under the age of 18
- unattached people aged 45 to 64
- recent immigrants
- Aboriginal people
- people with a physical or mental disability

Among these low-income households, an estimated 865,000 children aged 17 and under, or 12.8 percent of all children, were living in low-income families in 2004. The rate was well below the peak of 18.6 percent in 1996, but up slightly from the low of 12.1 percent in 2001.

Assisting Canadians to find and keep work means providing continued support and skills development. This is key to reducing the risk of low income. Looking ahead, however, Canada’s strong economic and labour market performance in 2005 and the positive prospects for the coming years will likely translate into further real income gains for these groups.

Quality of life extends beyond the possession of employment and a liveable income, to include general health, appropriate housing, education and learning opportunities, community and social support networks, career development, work-life balance, a sense of belonging and life satisfaction.

For many working families, work-life balance remains a challenge. In 2003, 64.8 percent of families had dual-incomes. By 2005, 67.2 percent of women with children under the age of six were employed. Many lone working mothers find it especially challenging to work and care for their children. The responsibilities surrounding the care of senior family members, which are most often assumed by women, are creating further pressure. These pressures can affect the health and well-being of family members. Along with changes in family structure, they may lead to a greater demand for family-friendly work practices, such as worksite daycare services, and flexible working arrangements.

Quality of life indicators reveal that communities are changing due to increased urbanization and regional migration from east to west. Furthermore, indicators measured across 20 Canadian communities suggest an increased risk of homelessness in Canadian communities, possibly due to decreased vacancy rates in rental housing and record-level housing starts, targeted at the homeownership market. Among those in need of affordable housing, over two thirds are renters.⁶

⁶ Canadian Mortgage and Housing Corporation, *Canadian Housing Observer*, 2005.

Despite these challenges, Canada has a long history of voluntary action within local communities. Canada's thriving civil society is demonstrated by a fairly large and diverse non-profit sector. In 2003, an estimated 161,000 non-profit and voluntary organizations operated in Canada, including daycare centres, sports clubs, arts organizations, private schools, hospitals and food banks. Organizations that are part of the community non-profit and private sectors are key vehicles for well-being and civic participation.

Canada's Socio-Economic Future

Canadians' ability to attain their full potential will continue to be challenged by variables such as education, income level, employability and community capacity. Capitalizing on the opportunities offered by globalization, the knowledge-based economy and changing demographics will require innovative policy-making, collaboration with various partners and a commitment to achieving real results for Canadians.

The following table presents a list of the key contextual indicators that are of interest to HRSDC. These indicators form the basis of the demographic and economic environmental analysis presented above. More details on contextual indicators and the overall indicators framework are shown in the section Performance Measurement Framework.

HRSDC CONTEXTUAL INDICATORS		
INDICATOR	LEVEL	
Net population growth, by source	(July 2004 to July 2005)	
	Total	0.93%
	Natural increase	0.32%
	Net migration	0.60%
Population dependency rates, by age group	(July 2005)	
	19 years or less	24.3%
	65 years or over	13.1%
	Total	37.3%
Real GDP per capita (1997 dollars)	\$35,900 (annual average 2005)	
Participation rate	By age group (2005)	
	15 years or over	67.2%
	15 – 24 years	65.9%
	25 – 54 years	86.3%
	55 years or over	31.5%
Unemployment rate	By age group (2005)	
	15 years or over	6.8%
	15 – 24 years	12.4%
	25 – 54 years	5.8%
	55 years or over	5.1%

HRSDC CONTEXTUAL INDICATORS (continued)

INDICATOR	LEVEL	
Hourly earnings, by education level	Annual average (2005)	
	Overall	\$20.90
	Less than high school diploma	\$15.70
	High school diploma or incomplete postsecondary studies	\$18.30
	Post-secondary certificate or diploma	\$20.50
Proportion of the 20-24 year-old and 25-64 year-old population with a high school diploma	University degree	\$26.70
	(2001)	
	20-24	75.0%
	25-64	65.6%
Proportion of working-age Canadians (16-65) with Level 2 literacy or below	(2003)	42%
The unionization rate defined as the proportion of non-agricultural workers who are covered by a collective agreement (national)	(2005)	32.2%
Incidence of low income – number and percentage of Canadians living with low income (post-tax LICOs)	(2004)	
	All persons	11.2%
	Under 18 years	12.8%
	18-64 years	11.7%
	65 years or over	5.6%
Proportion of low-income households in census metropolitan areas living in low-income neighbourhoods	(2000)	11.9%
Core housing need	(2001)	13.7%

Policy Environment

Introduction

Traditionally, social and economic policies were regarded as pulling in opposing directions. Economic policies were thought to increase prosperity through productivity increases, while social policies focused on redistributing wealth. As such, efficiency and equity were seen to be tradeoffs. This older model of economic growth has been replaced by a newer and more dynamic understanding of how economic and social strategies are mutually reinforcing. Countries where opportunity is more equally distributed tend to grow faster. These countries are also more resilient and adaptable to economic shocks. Societies that sustain their economic growth do so by focusing their policies upon productivity, skills and learning, an efficient labour market and strong social foundations.

Thus, Canada's success at home and internationally is increasingly dependent upon our ability to sustain and improve well-being through economic and social development. If Canada is to reach its potential in the evolving global economy, its policies and programs will need to be guided by recognition that the development of human capital is an important determinant of social and economic opportunity over the life-course of individuals. Canada will also need to rely increasingly on its communities, institutions and networks to identify challenges and opportunities, as well as to develop their own innovative solutions to social and labour market problems.

Investments

Investments in the labour market and in social development can drive long-term economic growth. Such investments expand the capabilities and the range of opportunities for everyone, from early childhood through the entire life-course. They are thus a key to overcoming the entrenchment of disadvantage and exclusion.

Historical concerns about unemployment and inadequate wages and benefits have been the focus of labour market policies. On the learning side, emphasis has been on increasing post-secondary education attainment rates to support economic and social prosperity. However, over the medium term, labour markets will tighten. The challenge will be to find ways to increase the pool of skilled labour and to match it more effectively with unmet demand in key sectors and regions.

Tightening labour markets offer new possibilities for facilitating business and employer interest in tapping into new labour sources such as under-represented groups and investing in the re-skilling of workers. The tight labour market also increases the importance of investing in adult learning and literacy and promoting access to and encouraging saving for post-secondary education. The international experience of economies with advanced aging profiles (e.g. Japan) and that have experienced extreme labour market tightening due to demand growth (e.g., United States) demonstrates that national economic growth connects with individual goals related to employment, inclusion, and financial security.

Social development also provides economic returns. It assists people in acquiring the tools to successfully manage transitions and challenges in their lives. Its focus on prevention and integrated solutions creates efficiencies and reduces costly remedial interventions.

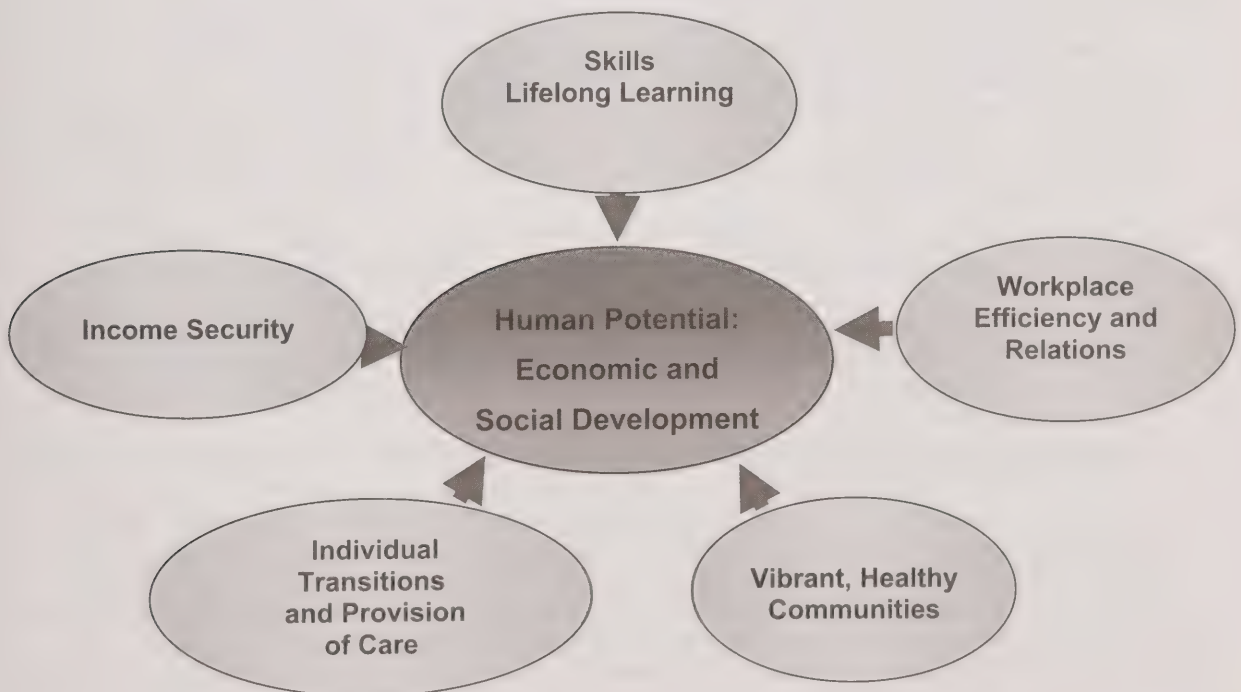
Beyond the rewards of economic prosperity for Canada as a whole, these investments provide a pathway to social development through the increase of individual capital. The Department has the potential to contribute further to this objective in many ways, such as investing in families and children, building on Canada's "knowledge" infrastructure by developing timely and relevant data, information, research, and other evidence to support decision-making over the life-course, working with employers and labour to modernize federal labour standards, investing in communities and working with partners to alleviate homelessness.

Social and Economic Challenges

Enabling Canadians to seize the opportunity of the future will require some dramatic shifts in our policies, programs and partnerships. Moreover, Canada's position in the global market-place and the well-being of Canadians will also depend upon our ability to respond quickly and creatively to the following challenges:

- Participation and inclusion
- Balancing earning and care
- Low income
- Literacy levels
- Supports for adult learners
- Skills gap and skills under-utilization
- Limited community capacity
- Demographic change, including the aging population and declining birth rate

The Department's policy challenge is to play an effective role in enhancing human potential in Canada through economic and social development.



Policies must achieve tangible results for Canadians, including real growth in the standard of living, and improved economic and social outcomes for individuals and families.

Policy Context

HRSDC integrates labour market, learning and social policies to guide departmental approaches that promote sustainable social and economic outcomes for all. Further exploration of regional and sectoral approaches to address challenges will be a key element.

As no one government working alone could achieve goals in all these priority areas, partnerships are essential to success. Today's policy environment demands improved understanding, as well as more effective partnerships, with provinces, territories, international partners, employers, the community non-profit sector, social partners, labour and other key stakeholders such as educational institutions. Working with other governments is particularly important in areas of shared jurisdiction or mutual interest. HRSDC fosters these relationships through a number of established federal/provincial/territorial forums, working arrangements and bilateral contacts.

As the Department moves forward, it must also respond to Canadians' expectations for the highest level of service, accountability and transparency. Effective accountability and reporting continues to be one of the founding principles for these relationships and for achievement of policy results. Policies and programs must be designed and implemented in ways that achieve tangible results for Canadians. These policies must learn from and adapt international best practices and approaches if Canada's economic and social development is to be sustainable.

Overarching goals:

- Foster participation in the labour market, lifelong learning and society by increasing choice and flexibility, and by supporting decision-making through the development and availability of quality knowledge and information to ensure all Canadians have the opportunity to contribute to, and benefit from, economic and social development.
- Address economic security through measures to: support Canadians in low-income situations in achieving income security; address child poverty and its long-term impacts on social development; address multiple risks and barriers among vulnerable groups at risk of exclusion, including the most marginalized such as disabled and homeless people.
- Balance earning and caring responsibilities of Canadians through policies that support work-life balance, including flexibility of choice in child care, and a comprehensive response to the needs of caregivers.
- Improve skills, including literacy and essential skills, and promote lifelong learning so that Canadians can acquire and continuously develop the skills to meet demand in growing market sectors.
- Support community-based efforts to improve the lives of Canadians by assisting communities, institutions and networks to identify their particular needs and challenges. Develop policy and work in partnership to develop innovative solutions to social problems, such as new tools for achieving self-sufficiency.
- Provide leadership in ensuring worker-management relations are conducive to safe, productive and cooperative workplaces.

The Department participates in a number of international forums and works with international partners on a variety of issues through policy discussions, formal agreements, research and technical cooperation with developing countries. HRSDC ensures that Canada's interests are represented internationally. For example, consistent with its domestic focus to better reflect departmental interest, the Department also participates in international forums such as the Organization for Economic Co-operation and Development (OECD) and the G8 countries on international employment, and learning policy directives, research and knowledge exchange. The outcome of this work feeds into policy development in Canada to ensure that Canada's employment, social and learning policies provide a competitive environment, which makes our labour force attractive to foreign investors.

This year, the OECD launched a new job strategy which will influence labour market and skills development policies for the next ten years in most developed countries. HRSDC hosted the OECD Summit on the New Job Strategy in Toronto in June 2006. HRSDC will continue to work closely with the OECD to ensure that the New Job Strategy becomes a useful tool to assist HRSDC in meeting the human capital challenges of the coming years.

The full and equal participation of women in the labour market and in society remains an important dimension of the renewed focus on human capital. In compliance with Canada's domestic and international commitments, the Department carries out analyses and activities to ensure that policy and program development, implementation and evaluation are designed to support gender equality. Canada must also take into account its domestic and international commitments on broad human rights issues in developing its policies and programs, as well as actively engage other government departments on these issues.

Management Environment

Governmental Context

One of the Government's top priorities is the *Federal Accountability Act*. On April 11, 2006, the Government introduced Bill C-2 entitled the *Federal Accountability Act* and published a related Action Plan on measures to strengthen accountability and increase transparency and oversight in government operations. The Act is intended to ensure that the Government of Canada meets, in all of its roles, the highest standards of integrity, effectiveness and accountability. It is currently in Senate review.

Sound management is a cornerstone of effective and accountable government. The Management Accountability Framework establishes the standards for management in the Government of Canada and is the basis for management accountability between departments, the Treasury Board Secretariat and the Public Service Human Resources Management Agency. It is a framework of accountability for deputy heads to ensure that the conditions for good management are put in place to achieve results for Canadians. The Framework consists of 10 essential elements of sound management, accompanied by a series of indicators and associated measures that establish clear expectations and allow departments to monitor performance.

Departmental Context

The Department's financial arrangements include statutory programs, grants and contributions, operating expenditures, program agreements with provinces and territories and statutory transfer payments. The Department has three major sources of funds – the Consolidated Revenue Fund (resources that are annually voted by Parliament and funding for statutory programs), the Employment Insurance Account and the Canada Pension Plan.

Moreover, the Department must manage a wide field of research, policy, program development and service delivery and a broad scope of responsibilities in the areas of social development, labour market development, work relations, learning, income security and other areas.

As well, the Department increasingly must manage in the context of shared outcomes and partnerships with provinces/territories, the private sector, communities, labour, Aboriginal peoples and other partners.

Service Context

Canadians expect timely and convenient service. Around the world, citizen satisfaction and overall confidence in government's ability to deliver improved services is a key pursuit. According to the 2006

Accenture survey "Leadership in Customer Service: Building the Trust", Canada is at the leading edge of the trend to offer citizen-centered services and transform service delivery. The vast majority of Canadians support the idea of accessing a majority of Government of Canada services through a single federal agency and most believe that this approach would improve service.

Parliamentary Context

HRSDC must work effectively with parliamentary oversight bodies such as parliamentary standing committees, the Office of the Auditor General, the Commissioner of the Environment and Sustainable Development, the Privacy Commissioner, the Information Commissioner and the Public Service Commission. In addition, oversight is provided within government by the Treasury Board Secretariat, the Comptroller General and the Public Service Human Resources Management Agency.

Reports that were released by the Auditor General and parliamentary committees and that have recommendations of particular importance to HRSDC management include:

- Report of the Standing Committee on Human Resources, Skills Development, Social Development and the Status of Persons with Disabilities – Study on Employment Insurance Funds, 2005
<http://cmte.parl.gc.ca/cmte/CommitteePublication.aspx?COM=8982&Lang=1&SourceId=100965>
- Report of the Standing Committee on Human Resources, Skills Development, Social Development and the Status of Persons with Disabilities – Study on the Summer Career Placements Program, 2005
<http://cmte.parl.gc.ca/cmte/CommitteePublication.aspx?COM=8982&Lang=1&SourceId=136509>
- Report of the Standing Committee on Human Resources, Skills Development, Social Development and the Status of Persons with Disabilities – The Report on Issues Related to Accessibility for Persons with Disabilities within the Parliamentary Precinct and the Federal Public Service, 2005
<http://cmte.parl.gc.ca/cmte/CommitteePublication.aspx?COM=8982&Lang=1&SourceId=121676>
- Auditor General of Canada Report 2005, Chapter 4, Managing Horizontal Initiatives
<http://www.oag-bvg.gc.ca/domino/reports.nsf/html/20051104ce.html>
- Auditor General of Canada Report 2006, Chapter 6, Management of Voted Grants and Contributions
<http://www.oag-bvg.gc.ca/domino/reports.nsf/html/20060506ce.html>

Corporate Risks

Setting the Context

The analysis of environmental scans and risk information collected at both the corporate and the program activity levels has resulted in the identification of three key risks and related challenges the Department faces in achieving its objectives and commitments for 2006-2007. The key risk areas are:

- building relationships with external partners and stakeholders
- recruiting and retaining competent and skilled people
- exercising appropriate governance and oversight

The risk information below presents a snap-shot of the most significant risks the Department is facing during the 2006-2007 planning exercise. The key risks and the Department's capacity to manage them were assessed to inform the setting of priorities identified in this report.

Building relationships with our external partners and stakeholders

At risk is the ability to engage in and build the right relationships with external partners and stakeholders to ensure timely progress in the social and economic agenda and delivery on commitments.

The Department faces the challenge of developing effective partnerships to achieve goals for enhancing income security, working with communities, and advancing a skills and lifelong learning policy agenda. This involves many areas of shared responsibility, where the Government of Canada, provincial and territorial governments, Aboriginal peoples, other communities and private sectors all play a role. As mentioned in the Policy Environment Section, partnerships are key to our ongoing success in achieving departmental social and economic outcomes. The complexity of multi-level governance relationships and the increased expectations of stakeholders to play a strategic role in decision-making may affect our ability to ensure timely progress in developing effective policies.

To manage this risk, in addition to continuing close ties with traditional, national stakeholder groups and experts, the Department has been developing federal/provincial/territorial and stakeholder engagement strategies to support knowledge exchange, longer-term collaborative agendas and emerging possibilities for multi-level governance and new partnerships. It will also continue to capitalize on links with other federal departments to effectively engage partners. The priorities and program activities described in this report demonstrate actions to support and enhance partnership-based initiatives to achieve our objectives and strategic outcomes.

Recruiting and retaining competent and skilled people

At risk is the capacity to attract competent and skilled people, and retain and develop them, which may hinder the ability to deliver on commitments and to exercise due diligence.

One of the significant challenges for 2006-2007 is building and strengthening the Department's human resources capacity. HRSDC recognizes that good management and strong organizational performance depend on the capacity of its workforce. The Department is committed to being a leader in change and innovation by enhancing the knowledge and skills of its workforce, while ensuring high-quality policies, programs and services.

There are shortages of skilled and experienced people in several specialized professional communities such as human resources, finance and internal audit and in specific program expertise, as in industrial relations and occupational health and safety. These shortages intensify the challenge of recruiting and retaining highly qualified people.

This challenge is made more complex by the February 2006 reunification of the Department. In the early stages of integration, the uncertainty about roles and responsibilities and organizational change are leading to additional stress and change fatigue. This may affect HRSDC's ability to attract and retain competent people.

To mitigate these risks, considerable work is underway to strengthen human resources management. A department-wide learning strategy, currently being developed, will guide the continued implementation of the *Public Service Modernization Act*. New integrated business and human resources planning, the identification of optimal strategies for human resources management, and integrated learning and training opportunities for employees are key elements of the strategy.

In addition, the development of a clear vision and mission statement for the Department, involving all employees, is underway. This exercise will help HRSDC better define its role and bring clarity to its mandate. The change brought about by the integration of Human Resources and Skills Development Canada, Social Development Canada, and Service Canada will be guided by a transformation plan that will focus on ongoing and effective organizational and cultural change.

Exercising appropriate governance and oversight

At risk is the ability to exercise appropriate governance and oversight on the stewardship of resources and the state of internal controls within an environment of major organizational changes and evolving accountability relationships.

In the context of high expectations for improved accountability for government programs and services, the Department must continue to manage the challenges associated with an appropriate governance and oversight regime. Expectations include providing improved results-based performance information and assurance on risk management, the state of internal controls, and governance processes. As the Department continues to implement a governance framework to structure the relationship with Service Canada, it is also expected to fulfill the requirements of the new Treasury Board Internal Audit Policy and move towards a Chief Financial Officer model that strengthens financial management. These new requirements may affect our ability to meet all expectations and compliance requirements within the Department and at the government level.

Several strategies will help manage this risk. Strengthening the links among policy development and program design, research and knowledge, program evaluation results, and results-based management approaches will ultimately yield improved outcome measures and results for Canadians. The assessment of the Financial Control Framework and Comptroller's Office capacity for financial oversight will guide the development of strategies designed to manage financial risks. A departmental review of grants and contributions will develop recommendations to increase flexibility in program delivery while maintaining the integrity of grants and contributions programs and activities. Program integrity, clear accountability and effective financial management will continue to be areas of increased attention for senior management.

Conclusion

Improving HRSDC's ability to handle risks and uncertainties is important in the development of effective policies and improved service delivery. As well, the Department continues to strengthen the practice of integrated risk management to effectively manage ongoing strategic and operational risks in delivering services within or through partnerships with other public and private-sector organizations. In pursuit of excellence, risk management, including the monitoring of mitigation strategies, remains a priority for the Department.



DEPARTMENTAL PRIORITIES AND PERFORMANCE MEASUREMENT FRAMEWORK

Departmental Priorities

HRSDC has identified priorities for 2006-2007 based on an assessment of its mandate, as part of the broader Government of Canada objectives, and the environment in which the Department is operating.

An Opportunity for HRSDC to Implement Key Governmental Priorities

The Speech from the Throne and Budget 2006 set the Government's agenda and reiterated its five main priorities. Among those priorities, the Government confirmed its commitment to providing choices for child care in Canada.

Budget 2006 included details of the Universal Child Care Benefit, which provides Canadian families with \$1,200 per year for each child under six years of age. All families with young children benefit, regardless of income and the type of child care they choose.

In Budget 2006, the Government also committed to creating new child care spaces. HRSDC will be consulting with provinces and territories, employers, community non-profit organizations, parents and Canadians to help inform the design of the Child Care Spaces Initiative.

In addition to Canada's Universal Child Care Plan, Budget 2006 addressed key governmental commitments of importance to HRSDC, such as workplace skills and lifelong learning. The Department was allocated \$18 million over two years to create the Canadian Agency for Assessment and Recognition of Foreign Credentials. Regarding apprenticeship, HRSDC will be moving forward with implementing an Apprenticeship Incentive Grant. Budget 2006 also committed to decrease parental contributions to the Canada Student Loans Program, introduce a Textbook Tax Credit, and eliminate taxation of Scholarships and Bursaries. Other Government commitments pertaining to HRSDC announced in Budget 2006 include: programs aimed at youth crime prevention; and a feasibility study exploring options for addressing challenges related to older workers' employment and participation in the labour market.

HRSDC priorities for 2006-2007 are summarized in the following tables.

The achievement of its strategic outcomes does not rest solely with the Department

Without partners, the Department alone cannot reach its goals. Success can happen only with the active participation of many players. Ensuring Canadians have access to tools to participate fully in the labour market and society requires the active participation of a multitude of partners with the Department acting as a catalyst.

HRSDC works closely with provincial and territorial partners, Aboriginal Peoples, not-for-profit and community-based volunteer organizations, and with Canadians, building on established relationships bilaterally and through multilateral forums to achieve its commitments. Employers and unions play an important role in the establishment of workplace-based training and learning and also in the establishment of safe, stable and productive workplaces. Finally, individuals and the choices they make will be critical to the achievement of the Department's goals.

TABLE 2A: HRSDC PRIORITIES BY STRATEGIC OUTCOME**POLICIES AND PROGRAMS THAT MEET THE HUMAN CAPITAL AND SOCIAL DEVELOPMENT NEEDS OF CANADIANS****POLICY, RESEARCH AND COMMUNICATION**

- Promote key human resources and social development policies of the Government of Canada
- Develop and implement key Departmental frameworks and strategies
- Advance knowledge development to support informed decision-making
- Increase engagement and collaboration with our partners and Canadians through public involvement and other activities to ensure better, innovative and complementary policy initiatives

ENHANCED CANADIAN PRODUCTIVITY AND PARTICIPATION THROUGH EFFICIENT AND INCLUSIVE LABOUR MARKETS, COMPETITIVE WORKPLACES AND ACCESS TO LEARNING**LABOUR MARKET**

- Work with provinces, territories and stakeholders to ensure that labour market programming is coherent, comprehensive and flexible
- Provide advice on Employment Insurance income support to ensure it remains well suited to the needs of Canada's economy and workforce
- Build more effective partnerships to improve Aboriginal labour market outcomes
- Develop approaches to reduce barriers and help vulnerable Canadians, such as at-risk youth, and disabled and older workers, participate in the labour market

WORKPLACE SKILLS

- Articulate an integrated workplace skills strategy by working with provinces, territories, key government departments and stakeholders in advancing multiple activities that include trades and apprenticeship, foreign credential recognition, labour market information, as well as sectoral initiatives

LEARNING

- Continue to assess policy and program options to address financial and non-financial barriers to post-secondary education and lifelong learning
- Implement the Adult Learning, Literacy and Essential Skills Program and finalize the implementation of the Canada Learning Bond

TABLE 2A: HRSDC PRIORITIES BY STRATEGIC OUTCOME (continued)
SAFE, HEALTHY, FAIR, STABLE, COOPERATIVE, PRODUCTIVE WORKPLACES AND EFFECTIVE INTERNATIONAL LABOUR STANDARDS

LABOUR	<ul style="list-style-type: none"> • Complete a comprehensive review of Part III (Labour Standards) of the <i>Canada Labour Code</i> • Develop policy options for a modernized Federal Workers' Compensation System including a Federal Disability Management Strategy • Complete preparations for the Wage Earner Protection Program • Parliamentary review of the <i>Employment Equity Act</i>
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ENHANCED INCOME SECURITY, ACCESS TO OPPORTUNITIES AND WELL-BEING FOR INDIVIDUALS, FAMILIES AND COMMUNITIES

SOCIAL INVESTMENT	<ul style="list-style-type: none"> • Enhance income security and active participation in communities • Break down barriers to full participation in the richness of Canadian life and communities • Support non-profit community sector efforts to innovate, strengthen networks of collaboration, develop capacity and share good practices to contribute to community well-being
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CHILDREN AND FAMILIES	<ul style="list-style-type: none"> • Provide support and choice for families, through Canada's new Universal Child Care Plan and other existing initiatives, to help ensure their children have the best possible start in life
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HOUSING AND HOMELESSNESS	<ul style="list-style-type: none"> • Contribute to the reduction of homelessness in Canada • Develop homelessness and housing policies for Canadians, including Aboriginal peoples • Strengthen horizontal links between housing and homelessness and other policy areas
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ACHIEVE BETTER OUTCOMES FOR CANADIANS THROUGH SERVICE EXCELLENCE

SEAMLESS, CITIZEN-CENTERED SERVICE	<ul style="list-style-type: none"> • Transform service to Canadians • Achieve and reward service excellence culture • Strengthen accountability and transparency
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INTEGRITY	<ul style="list-style-type: none"> • Strengthen accountability and transparency
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COLLABORATIVE, NETWORKED GOVERNMENT SERVICE	<ul style="list-style-type: none"> • Transform service to Canadians • Achieve client information integration
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With the introduction of the Federal Accountability Act, the Department is committed to strengthening accountability

Being accountable is important to the new government and to the Department. Through the Federal Accountability Act and Action Plan, the Government of Canada is bringing forward specific measures to help strengthen accountability and increase transparency and oversight (www.accountability.gc.ca). HRSDC's commitment to the act will focus specifically on strengthening the auditing and accountability functions, and on the review of grants and contributions.

Other HRSDC internal priorities for the planning period that will strengthen accountability, as well as increase transparency and oversight, focus generally on the improvement of good governance, financial stewardship and human resources management.

TABLE 2B: HRSDC MANAGEMENT PRIORITIES

GOVERNANCE AND EFFECTIVE MANAGEMENT	<ul style="list-style-type: none">• Strong leadership and communication in managing the integration of the Department• Modernize shared corporate services• Ensure effective governance relationship among policy development, program design and service delivery through Service Canada• Ensure effective governance of the Department's significant engagement in horizontal and intergovernmental activities• Implement the new communications governance model for grants and contributions• Pursue a robust internal communications program that supports a common culture, and which provides timely information and communications tools to HRSDC employees
FINANCIAL STEWARDSHIP	<ul style="list-style-type: none">• Enhance and sustain the integrity of financial analysis, monitoring and reporting to support managerial and parliamentary decision-making• Improve performance measures and management of departmental risks• Strengthen integrity of programs by improving identity information and reducing error and fraud• Strengthen internal audit, in accordance with the Internal Audit Policy• Review the management of grants and contributions• Through Service Canada, realize Expenditure Review savings commitments

TABLE 2B: HRSDC MANAGEMENT PRIORITIES (continued)

HUMAN RESOURCES MANAGEMENT

- Nurture a values-based organization that is fair, enabling and safe, as well as productive and principled
- Enhance the sustainability and adaptability of the departmental workforce through human resources planning, recruitment, succession management, performance management and continuous learning
- Become a model employer with respect to accessibility in all aspects of the employment relationship

Corporate services play a critical role in the achievement of HRSDC priorities and outcomes

Corporate services play a critical role in the achievement of strategic priorities and outcomes, and ensure that the expectations of Canadians and Parliament are met. HRSDC's corporate services, including human resources, ministerial services, comptroller, legal services, systems and corporate management all have priorities that are integrated into the Department's overall strategic outcomes, and make a critical contribution to the capacity to deliver on HRSDC's mandate.

Key to the Department is the commitment to providing excellence in ministerial correspondence and parliamentary services, and services to the offices of the Ministers, the Parliamentary Secretary and Deputy Ministers. Included here is support for key priorities that were outlined in Budget 2006 such as: the Universal Child Care Plan; the Child Care Spaces Initiatives; Apprenticeship initiatives; the Canadian Agency for Assessment and Recognition of Foreign Credentials; and post-secondary education and learning initiatives.

HRSDC's ongoing commitment is to ensure a fair, enabling, healthy and safe workplace. With the implementation of the *Public Service Modernization Act*, the Department's objective will be to continue communication, learning and support for managers, staff and employees. HRSDC supports managers at all levels in the Department in meeting their delegated responsibilities under public service modernization, and their responsibilities and accountabilities as described in the Management Accountability Framework.

Corporate services will have a key role in supporting departmental integration through the provision of effective management and strategies in areas such as human resources, information technology and management, and administrative services.

Departmental decision-making processes will continue to be enhanced and improved. Through the effective integration of elements such as strategic planning and performance management, corporate and business planning, resource allocation, human resources planning, financial and systems planning, performance measurement, audit and risk management and evaluation, managers are able to make the best choices in using resources, and in supporting overall efforts to improve the management of spending across the government.

Through excellence in management practices, learning tools and training, HRSDC will develop an organization of leaders and the capacity to ensure a skilled workforce. The Department will continue to promote the use of both official languages in the workplace, and will work to achieve departmental workforce diversity objectives by implementing a diversity strategy.

Through the implementation of the new public service learning policy and targeted development programs for specialized professional communities, HRSDC will continue to ensure a workforce that is productive and principled, and one that supports the policy capacity of the Department.

HRSDC will develop and implement a client-focused business delivery model for human resources. The model will ensure a comprehensive approach to all aspects of human resources management, service delivery and accountability, and will support the achievement of departmental strategic outcomes. In addition, human resources planning will be fully linked with business planning, using integration tools that have been developed to provide support to strategic planners, human resources and managers. These strategies will enable managers and staff to adapt more readily to program and organizational changes, including the integration of HRSDC.

HRSDC's workplace will support employees by developing initiatives designed to foster leadership and learning, and to provide a creative environment. This work will include the development of employee generated proposals under the Creativity Fund, and the completion of a Place Vanier Child Care Centre assessment.

Finally, HRSDC will be working to finalize governance structures with Service Canada for the provision of transactional services in human resources, information technology and administration. A key piece of this work will be the development of schedules for services in each of these areas. These agreements themselves will be governed by tables that will effectively delineate ongoing operations, responsibilities and accountabilities for multiple service areas. The development of strong relationships will help ensure that shared transactional services meet HRSDC's departmental needs, and support the achievement of the Department's strategic outcomes.

PERFORMANCE MEASUREMENT FRAMEWORK

HRSDC is committed to measuring its performance, managing for results and reporting on its progress. To accomplish this, HRSDC has established a performance measurement framework that allows the Department to understand its operating environment, define clear performance expectations, track progress through measures, and make any required adjustments. The performance measurement framework provides Parliament and Canadians with information to assess the Department's progress in achieving results.

The framework sets out three types of indicators: contextual indicators, strategic outcome indicators and program indicators.

Contextual indicators depict the environment in which the Department operates by describing broad trends in society, the economy and labour markets – such as population growth and gross domestic product per capita. Contextual indicators guide policy development and departmental plans and priorities by allowing the Department to assess the continued relevance of programs and the requirement for new programs.

Strategic outcome indicators reflect the ultimate results that the Department is striving to influence over the medium-to-longer term. It is important to note that while the strategic outcomes are within HRSDC's sphere of influence, the Department is not the sole contributor to their attainment. Other orders of government, other federal departments, key stakeholders and partners, as well as individual Canadians make important contributions. For example, the percentage of the adult workforce that participates in job-related training is not due solely to the influence of the workplace skills programs, but is also affected by the decisions of individual employers and employees, their associations and other orders of government.

Program indicators relate more directly to the programs that the Department delivers. These indicators facilitate the setting of targets or objectives for the Department's programs and the monitoring of results. Most of these indicators are measures over which the Department exercises substantial control. Program indicators can be operational in nature and related to the outputs produced by the Department, and include client satisfaction, and program access and reach, as well as measures of the impacts or results achieved by the program.

Positive change in program indicators should be interpreted as a necessary, but not sufficient, condition to achieve improvement in strategic outcomes. Indeed, the Department recognizes that performance indicators are only part of a comprehensive performance measurement framework. Periodic, in-depth program evaluations also provide an important source of information on the effectiveness of HRSDC programs.

HRSDC will continue to work on strengthening performance indicators, drawing on evaluation and research results. Through its ongoing program evaluation and systematic review, the Department will assess the relevance and validity of the performance indicators as they relate to the achievement of expected results for Canadians.

Service indicators and additional measures relate to the quality, timeliness and volumes associated with the delivery of services to Canadians.

A supplementary document providing a more detailed explanation of HRSDC's performance indicators by strategic outcome with data sources is available on the Department's website at <http://www.hrsdc.gc.ca>.

Program Performance Indicators

PROGRAM INDICATORS

Enhanced Canadian productivity and participation through efficient and inclusive labour markets, competitive workplaces and access to learning

PROGRAM INDICATORS (LABOUR MARKET)

2006-2007 TARGET

Access

Percentage of unemployed targeted by the Employment Insurance program eligible to collect regular Employment Insurance benefits

2004 Result: 80.4%

Rate of participation of designated groups (self-identified) and older workers in Employment Benefits and Support Measures (EBSM)

	Rate of Participation in EBSM 2004-2005	Percentage of the entire unemployed labour force ⁷
Women	46.7%	45.5%
People with disabilities	4.5%	9.8%
Aboriginal persons	6.6%	6.5%
Visible minorities	6.2%	16.2%
Older workers (55 and over)	6.5%	17.3%

Adequacy

Proportion of regular entitlement collected by Employment Insurance claimants (%)

(2003-2004) 60.9%

Proportion of Employment Insurance maternity/parental entitlement collected by Employment Insurance claimants

(2004-2005) 92%

Labour market efficiency

Number of youth clients who return to school or become employed following an employment program intervention under the Youth Employment Strategy and proportion of these clients in the total number of action plans closed

7,400⁸

Number of Aboriginal clients who return to school or become employed following an employment program intervention under the Aboriginal Human Resources Development Strategy and proportion of these clients in the total number of action plans closed

20,500⁹

Number of clients employed or self-employed following an employment program intervention, and proportion of these clients in the total number of action plans closed

220,000

Proportion: Actual results to be reported

⁷ Percentages shown are reflective of the unemployed by designated group as a percentage of the entire unemployed Canadian labour force. For women, Aboriginal persons and visible minorities, unemployment data for labour force 15 years and over; for older workers, unemployment data for labour force 55 years and older (Census 2001). For people with disabilities based on unemployment data for labour force 15 years and over (Statistics Canada Participation and Activity Limitation Survey 2001).

⁸ These targets do not include returns to school following participation in the Summer Career Placements initiative under Summer Work Experience. Proportion: Actual results to be reported. (This is a new indicator, therefore, reliable objectives cannot be established due to the absence of sufficient historical data.)

⁹ These targets do not include returns to school following participation in the Summer Career Placements initiative under Summer Work Experience. Proportion: Actual results to be reported. (This is a new indicator, therefore, reliable objectives cannot be established due to the absence of sufficient historical data.)

PROGRAM INDICATORS (continued)

PROGRAM INDICATORS (WORKPLACE SKILLS)	2006-2007 TARGET
Number of apprentices that received the Apprenticeship Incentive Grant	New Measure
Increase in the number of trades people who are fully mobile in Canada through red seal endorsement	15,000
Number of tools and processes completed to be used in verifying and recognizing foreign credentials and work experience of foreign-trained professionals	85
PROGRAM INDICATORS (LEARNING)	2006-2007 TARGET
3-year loan default rate (direct loans only for 2006-2007)	26% ¹⁰
Number of Canadians who have ever received a Canada Education Savings Grant and who are attending post-secondary education in the current fiscal year	192,000
Percentage of Canadians under 18 years of age who have ever received a Canada Education Savings Grant	34%
Percentage of children eligible for the Canada Learning Bond who have a Registered Education Savings Plan	22%
SERVICE INDICATORS	
Client satisfaction with the overall quality of services provided by the Canada Student Loans Program	76%
Client (Registered Education Savings Plan providers) satisfaction with the overall quality of services provided by the Canada Education Savings Program	88%

Safe, healthy, fair, stable, cooperative, productive workplaces and effective international labour standards

PROGRAM INDICATORS (LABOUR)	2006-2007 TARGET
Percentage of collective bargaining disputes settled under Part I (Industrial Relations) of the <i>Canada Labour Code</i> without work stoppages	90%
Percentage of unjust dismissal complaints settled by inspectors (Part III of the <i>Canada Labour Code</i>)	75%
Disabling injury incidence rate (DIIR) measuring the change in the rate of lost time injuries, illnesses and fatalities within federal jurisdiction industries from year to year	Actual results to be reported
Percentage of money collected in relation to the amount found to be owed for complaints under Part III (Labour Standards) of the <i>Canada Labour Code</i> (excluding unjust dismissal complaints)	75%
SERVICE INDICATORS	
Client satisfaction with the quality of Workplace Information Directorate data	80%

¹⁰ Projection of the 3-year direct loan default rate

PROGRAM INDICATORS (continued)

Enhanced income security , access to opportunities and well-being for individuals, families and communities

PROGRAM INDICATORS (SOCIAL INVESTMENT)**2006-2007 TARGET**

Proportion of CPP contributors who have contributory coverage/eligibility for CPP Disability

New measure

Number of CPP Disability recipients who report a return to work and leave benefits – proportion of this group of clients who have remained off benefits for six months or more

New measure

Number of partnerships concluded that provide the public with knowledge of the OAS/CPP programs

New measure

Labour Market Agreements for Persons with Disabilities (LMAPD)¹¹

Number of participants in programs/services under the LMAPD

199,812

Number and percentage of participants completing a program or service through LMAPD programming, where there is a specific start and end point to the intervention, by province

76,311 (38%)

Number and percentage of participants who obtained or were maintained in employment through LMAPD programming, where the program or service supports the activity

43,680 (22%)

Opportunities Fund for Persons with Disabilities¹²

Number of clients served

5,539

Number and percentage of clients who obtained employment

1,711 (31%)

Number and percentage of clients with enhanced employability

2,198 (40%)

Number and percentage of clients who sought further skills upgrading (returned to school)

242 (4%)

Social Development Partnerships Program

Knowledge is created and disseminated to meet the social development needs of citizens

New measure

Understanding the Early Years Initiative

Number of communities that apply through the *Call For Proposals* process during each year

New measure

New Horizons for Seniors Program

Number of seniors leading and or involved in funded project activities within the community

New measure

¹¹ Actual data from 2004-2005: All numbers listed are provided by provinces (except New Brunswick and Quebec). The number of clients served is high because some clients have been double-counted as they received services from more than one program within the year. Provinces cannot isolate the clients double-counted.

The number of clients completing a program or service and the number of clients employed are considered low because of the clients being double-counted and also because not all programs have the explicit outcome of employment. The goals of many programs funded through LMAPD is to enhance the employability of the client through training and work on life-skills issues.

¹² Actual data from 2005-2006: The enhanced employability value is considered an underestimate. This is a generated field based on the completion of certain types of interventions like training. There are reporting issues which are currently being addressed.

PROGRAM INDICATORS (continued)
Social Development Partnerships Program Office for Disability Issues

Number of proposals (from contribution agreements) funded	46
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PROGRAM INDICATORS (CHILDREN AND FAMILIES)
2006-2007 TARGET

Incidence of low income – the change in the number and percentage of families and children that fall below the post-tax LICO, due to the National Child Benefit, in one year	Actual data to be reported
Depth of low income – the change in the aggregate amount of income that low-income families would need to reach the post-tax LICOs, due to the National Child Benefit, in one year	Actual data to be reported
Number of children under six years of age for whom their parents are receiving the Universal Child Care Benefit	95% of all children under six years of age. ¹³

PROGRAM INDICATORS (HOUSING AND HOMELESSNESS)
2006-2007 TARGET

Percentage of investments directed toward the continuum of supports and services based on priorities established by the community	At least 75% invested in community priorities
Ratio of total National Homelessness Initiative investments versus funding by type of partners for each province and territory 2003-2007	1 to 1.5
Increase in accessible sources of information/data on homelessness	Evidence of uptake of data/information

Achieve better outcomes for Canadians through service excellence
SERVICE INDICATORS
2006-2007 TARGET

Increase in number of Service Canada points of service (from 320 in March 2005)	533
24/7 availability of Internet – information and transaction (compared to March 2005 where only information was accessible online)	95%
Percentage of calls answered by an agent within 180 seconds	95%
Extend hours of service in Service Canada Centres (from 0 in March 2005)	60
Percentage of availability of Interactive Voice Response System	95%
Maintain or reduce number of official language complaints	Actual results to be reported
Establish Official Language Minority Community Groups points of service (from 0 in March 2005)	17
Offer service in languages other than English or French (from 0 in March 2005)	10
Provide forms online in formats accessible for people with disabilities (from 0 in March 2005)	10
Percentage of notifications sent within seven days of receipt of applications	80%
Percentage of Employment Insurance payments issued within 28 days of filing	80%
Percentage of passports delivered by Passport Canada within 20 working days of receiving the application from Service Canada, excluding mailing time	90%
Percentage of Canada Pension Plan retirement first payment within the month of entitlement	85%
Percentage of Old Age Security first payments issued within 30 days of entitlement	90%
Percentage of pleasure craft licences issued in one visit (service not offered in March 2005)	90%
Percentage of Social Insurance Number issued in one visit (service not offered in March 2005)	90%

¹³ This target is for the first year of the program. For future years of the program the target will be 100% coverage.

PROGRAM INDICATORS (continued)

Maintain or increase client satisfaction	Actual results to be reported
ADDITIONAL MEASURES	
Web Usage	Actual volumes to be reported
Phone Usage – agent calls	Actual volumes to be reported
Phone Usage – Interactive Voice Response calls	Actual volumes to be reported
Service Canada Centre visits	Actual volumes to be reported
Accuracy rate of EI payments	95%
EI Appeals Speed of Service	
-Board of Referees (30 days)	90%
-Umpire (60 days)	100%
Number of employment programs clients served	675,000
Annual increase in job seekers in Job Bank	5%
Annual increase in vacancies posted in Job Bank	5%
Client satisfaction with labour market information products and services - usefulness in conducting a job search	Actual result to be reported
Passport Applications Handled	Actual volumes to be reported
Pleasure Craft Applications Handled	Actual volumes to be reported
SIN Applications Received	Actual volumes to be reported
CPP Applications	Actual volumes to be reported
EI Applications	Actual volumes to be reported
OAS Applications	Actual volumes to be reported
Number of new Service Offerings	Actual volumes to be reported

Departmental Corporate Management — Human Resources and Official Languages

	2006-2007 Target
Employment Equity	
Representation of visible minority persons	9.4%
Representation of Aboriginal persons	3.0%
Representation of people with disabilities	3.6%
Representation of women	60.1%
Official language complaints	
Language of work	Actual results to be reported
Service to the public	Actual results to be reported

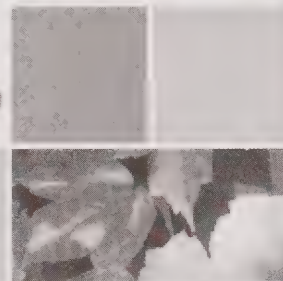


ANALYSIS OF PLANS, PRIORITIES AND PROGRAM ACTIVITIES BY STRATEGIC OUTCOME

- *Policies and programs that meet the human capital and social development needs of Canadians*
- *Enhanced Canadian productivity and participation through efficient and inclusive labour markets, competitive workplaces and access to learning*
- *Safe, healthy, fair, stable, cooperative, productive workplaces and effective international labour standards*
- *Enhanced income security, access to opportunities and well being for individuals, families and communities*
- *Achieve better outcomes for Canadians through service excellence*

This section describes HRSDC the plans and priorities by each strategic outcome. It also provides a short description of the major sub-activities (initiatives, programs and services) that support those priorities, including financial and human resources information for the next three years.

Strategic Outcome



POLICIES AND PROGRAMS THAT MEET THE HUMAN CAPITAL AND SOCIAL DEVELOPMENT NEEDS OF CANADIANS

PROGRAM ACTIVITY: POLICY, RESEARCH AND COMMUNICATIONS

HRSDC is committed to developing a comprehensive and integrated knowledge base to inform government action to respond effectively to the needs of citizens. This knowledge base consists of the development and strategic management of key national data assets, analysis of important trends and research on emerging issues and best approaches to human resources and social development matters, and evaluation of key departmental programs. Efforts are devoted to exchanging information and building constructive partnerships with groups that either conduct similar activities or develop policies and programs affecting HRSDC's mandate. Opportunities for effective feedback and dialogue with citizens, businesses and families are being developed to supplement these exchanges.

Over the coming year, the Department will strive for organizational excellence in the creation, management, exchange and use of knowledge about human resources and social development matters through a Knowledge Management Initiative. The development of forward-looking knowledge planning and management activities will strategically position HRSDC as a leader in the creation, sharing and use of Pan-Canadian knowledge and information at all levels. These strategies support informed decision-making, foster collaboration and partnership, coordinate actions among major players, and strengthen policy and program effectiveness.

HRSDC understands that it is accountable for explaining to citizens how their views have been taken into consideration. The development and implementation of a corporate Public Involvement Framework will contribute to the Department's proactive efforts to promote and facilitate public involvement and awareness of program development and delivery, and maintain a transparent and interactive relationship with the Canadian public.

The Department's work with other federal departments on horizontal policies is key to advancing the social well-being of Canadians. HRSDC will develop a new policy approach for gender and diversity analysis in policy and program development, as well as continuing to work horizontally on the development of a five-year federal Gender Equality Strategy. It will also continue to work with the community non-profit sector and federal government departments to promote dialogue, collaboration and support innovation. In addition, HRSDC is one of the federal departments working with the 2010 Olympic and Paralympic Winter Games Federal Secretariat, host partners, other governments and civil society to advance the development of the Games, including enhancing the participation of Aboriginal Peoples in the event and its related activities.

POLICY, RESEARCH AND COMMUNICATIONS: PRIORITIES AND PLANS

Priority: Promote key human resources and social development policies of the Government of Canada

Plans

- Develop policies that support the Government's commitments.
- Undertake an older worker feasibility study
- Undertake consultations on post-secondary education and training to help restore the fiscal balance.
- Work towards developing a long-term human capital policy/social policy for the 21st century

Priority: Develop and implement key departmental frameworks and strategies

Plans

- Develop a policy framework encompassing human capital and social development to underlie the new Department and identify key priorities
- Develop and implement a department-wide Knowledge Management Initiative
- Develop an integrated HRSDC Knowledge Plan, a medium-term strategy to develop and disseminate knowledge
- Develop the HRSDC Data Plan, a coordinated, comprehensive strategy for data and survey planning
- Strengthen strategies to include evaluation in the policy development process

Priority: Advance knowledge development to support informed decision-making

Plans

- Develop rigorous, integrated knowledge and evidence to identify current and emerging social policy and human resources development issues
- Develop integrated HRSDC knowledge exchange and engagement strategies to foster the sharing of high-quality knowledge and to support decision-making and on-going dialogue with external partners
- Support key government priorities through data, information and knowledge strategies
- Develop a common knowledge base on social policy and human resources development trends
- Conduct evaluations in key areas relating to departmental policies and programs
- Promote consideration of international policy research and analysis in development of policy initiatives to address human resources and social development priorities

Priority: Increase engagement and collaboration with our partners and Canadians through public involvement and other activities to ensure better, innovative and complementary policy initiatives

Plans

- Implement an engagement strategy and a Public Involvement Framework to guide all HRSDC public involvement activities in a manner that is coordinated and integrated both inter-departmentally and intra-departmentally
- Continue to support and enhance federal-provincial/territorial relations through formal meetings, consultations and working arrangements, which supports the Government's effort to strengthen the economic union and continue to support the social union
- Develop strategic policy advice and opportunities to support the social and economic development objectives of the 2010 Olympics and Paralympics Winter Games through horizontally working relationships
- Continue to support the Government of Canada's relationships with community sector organizations who play a key role in serving Canadians

POLICY, RESEARCH AND COMMUNICATIONS: PROGRAMS SUPPORTING PRIORITIES

The policy, research and communication program activity provides strategic policy leadership with a focus on domestic and international partnerships, and supports the development of programs and policies with audit, evaluation and research functions. This activity also supports the achievement of the Department's strategic and operational goals through planning and communications.

Strategic Policy: HRSDC focuses on addressing social and human capital challenges of Canadians through strategic, innovative solutions. To move forward with implementing the Government's commitments in the area of human resources and social development, the Department develops foundational policy frameworks and strategies. These frameworks and strategies also enable the Department to identify emerging policy issues for Canadians.

Knowledge, Analysis, Audit and Evaluation: Knowledge management, audit and evaluation support strong accountability, innovative and responsive policies and programs and evidence-based decision-making by governments, public institutions, businesses, communities, families and citizens.

Public Affairs and Engagement: The Department pursues engagement activities to develop better policies and programs by seeking Canadians' views and broadening knowledge and research.

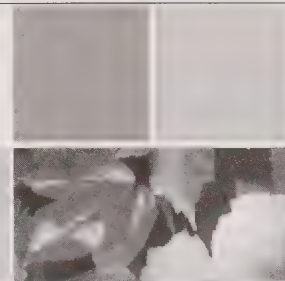
POLICY, RESEARCH AND COMMUNICATION: FINANCIAL AND HUMAN RESOURCES – PLANNED SPENDING

Financial and Human Resources			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Human Resources and Skills Development Canada - Policy and Program Support			
Gross Operating Expenditures	120.1	107.7	106.8
Social Development Canada- Social Development Policy and Innovation			
Gross Operating Expenditures	67.3	70.7	70.7
Total	187.4	178.4	177.5
Human Resources			
Full Time Equivalents	936	898	894

Details by Programs and Services			
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Human Resources and Skills Development Canada - Policy and Program Support			
Strategic Policy and Planning	43.7	42.0	41.9
Communications and Ministerial Services	44.5	37.1	37.1
Allocated Corporate Services ^a	37.1	33.9	33.8
Other	(5.2)	(5.3)	(6.0)
Sub-Total	120.1	107.7	106.8
Social Development Canada - Social Development Policy and Innovation			
Social Development Policy and Innovation	61.7	65.4	65.4
Allocated Corporate Services ^a	5.6	5.3	5.3
Sub-Total	67.3	70.7	70.7
Total	187.4	178.4	177.5
Human Resources			
Full Time Equivalents	936	898	894

^a Corporate Services resources related to the Minister's Office, the Deputy Minister's Office, the Comptroller's Office and the Shared Services have been prorated to each Strategic Outcome.

Strategic Outcome



ENHANCED CANADIAN PRODUCTIVITY AND PARTICIPATION THROUGH EFFICIENT AND INCLUSIVE LABOUR MARKETS, COMPETITIVE WORKPLACES AND ACCESS TO LEARNING

The aging Canadian labour force presents challenges that cannot be avoided. Canada's continued prosperity now and in the future lies in maintaining strong productivity growth and increasing labour force participation. HRSDC has a number of important programs that are vital to improving productivity and participation. These programs are situated in the following areas: Labour Market, Workplace Skills and Learning.

The labour market will increasingly require workers with higher levels of education and skill. A highly skilled workforce is vital to improving productivity and sustaining strong economic growth. Workplace Skills programs bring together a broad range of initiatives that address the urgent need for innovative responses to skills issues. Learning programs provide greater ease of access to post-secondary education and skills training, and promote the awareness and importance of lifelong learning. Together, initiatives in these areas are intended to deliver and boost the national skills pool and the longer-term labour supply. These programs are further complemented by initiatives under the Labour Market Program that facilitate the removal of barriers to employment and ensure that labour market participation rates are at their optimal level now and in the future.

The following outlines priorities and plans related to the program areas of Labour Market, Workplace Skills and Learning.

PROGRAM ACTIVITY: LABOUR MARKET

In support of this strategic outcome, the Department will continue to provide temporary income support to qualified unemployed workers which, in turn will promote economic stability, individual well-being and a flexible labour market capable of adjusting to changes in the economy.

The Department works with provinces, territories and other partners to support the objectives of creating a more integrated labour market system for Canada and ensuring the right tools are in place to address the needs of today's labour markets. Increased efforts in areas such as Aboriginal participation, youth at risk and displaced older workers will support this objective and help to facilitate an efficient labour market where the quantity and quality of labour supply effectively meet the demand, and an inclusive labour force through the removal of barriers and the enhancement of opportunities for the skills development of Canadians.

Through the Labour Market Development Agreements with provinces and territories, employment programs and services enable Canadians to prepare for, find and keep employment. Targeted strategies for Aboriginal Canadians and youth complement the EI program. The Department will adapt programs and strategies to ensure they remain well suited to the needs of Canada's workforce.

HRSDC continues to monitor and evaluate its programs and policies with an emphasis on linking evaluation with improved performance measurement, results-based management and ultimately better outcomes and results for Canadians.

HRSDC manages four horizontal initiatives¹⁴ – the Aboriginal Human Resources Development Strategy; the Aboriginal Skills and Employment Partnership Program; the Youth Employment Strategy; and Labour Market Development Agreements. Partnerships with provinces and territories, representative third-party groups, labour market stakeholders, and the private sector are key to achieving successful outcomes.

Priorities for 2006-2007 are to ensure that employment programs are in tune with the current environment and to work closely and more effectively with provinces, territories, Aboriginal groups and other partners.

Strategic outcome indicators	
INDICATORS	CURRENT LEVEL
Percentage of unemployed looking for work for one year or more (52 weeks and over).	2005 9.2%
Percent of youth (15-24 year-olds) not in the labour force or in school.*	2005 8.9%
Involuntary part-time employment as a proportion of all part-time employment.	2005 25.6%
Employment Insurance regular beneficiaries to unemployed ratio.	2004 43.6% (2003, revised to 43.5%)
Unemployment Rates by Designated Group.	Women 7.2% People with Disabilities 10.7% Aboriginal Peoples 19.1% Visible Minorities 9.5% Older Workers 6.0%
* Census 2001 data includes Labour Force 15 years or older that are unemployed.	

LABOUR MARKET: PRIORITIES AND PLANS

Priority: Work with provinces, territories and stakeholders to ensure that labour market programming is coherent, comprehensive and flexible

Plans:

- Continue to work with the province of Ontario on preparing for the transfer of responsibility for the design and delivery of EI-funded Employment Benefits and Support Measures under the Canada-Ontario Labour Market Development Agreement, which takes effect on January 1, 2007
- Develop, assess and propose options for program policies to ensure continuing relevance in a dynamic labour market based on comprehensive review of the lessons learned from program evaluations and other sources
- Strengthen links between active employment measures and workplace skills programs to ensure greater alignment with the demand side of the labour market
- Continue to strengthen links with Official Language Minority Communities with a view to ensuring the vitality of their local labour markets.

Priority: Provide advice on Employment Insurance income support to ensure it remains well suited to the needs of Canada's economy and workforce

Plans:

- Monitor and assess the labour market impacts of Employment Insurance pilot projects in regions of high unemployment to inform decisions for the Employment Insurance Program
- Complete a formal evaluation of EI Compassionate Care Benefits, introduced in January 2004, and assess the potential for policy adjustments related to the benefit
- Continue to review Employment Insurance Economic Regions, used to establish entitlement and benefit periods, working with new geographic data from Statistics Canada
- Monitor and assess the new EI rate setting legislation to ensure it achieves the intended objectives

¹⁴ Details on these horizontal initiatives can be found at: http://www.tps-sct.gc.ca/rma/epb-ibdrp/hrdb-rmbd/profil_e.asp

<p><i>Priority:</i> Build more effective partnerships to improve Aboriginal labour market outcomes</p>
<p><i>Plans:</i></p> <ul style="list-style-type: none"> • Strengthen and support the delivery of the Aboriginal Human Resources Development Strategy and the Aboriginal Human Resources Development Agreements across the country • Foster more private sector partnerships such as the Aboriginal Skills and Employment Partnerships program, thereby improving the participation of Aboriginal people in sustainable employment • Collaborate with other departments on Aboriginal Early Childhood Development to explore options, and develop a recommendation for a "single window" approach while supporting quality child care programs on-reserve and in the North • Work with Aboriginal partners, provinces and territories and other stakeholders to develop a new approach with workable solutions to reduce poverty and narrow the gap in employment outcomes for Aboriginal peoples
<p><i>Priority:</i> Develop approaches to reduce barriers and help vulnerable Canadians, such as youth, disabled and older workers participate in the labour market</p>
<p><i>Plans:</i></p> <ul style="list-style-type: none"> • In consultation with partners, undertake a review of youth employment programming to ensure it is aligned with current labour market and youth needs at the national, regional and local level • Achieve greater effectiveness within the Government of Canada for the Youth Employment Strategy and across all levels of government and non-governmental organizations in the development of youth programming • Adapt existing programs to the special labour market conditions of the North with a special focus on youth • Work with other levels of government and non-governmental organizations to address urban violence for at-risk youth through employment programming • Develop and implement an initiative to respond to short-term employment needs of displaced older workers, while undertaking a feasibility study to assess a range of measures available to assist these workers, with a view to developing a longer-term strategy.

Strategic Outcome

Enhanced Canadian productivity and participation through effective and inclusive labour markets, competitive workplaces and access to learning

PROGRAM ACTIVITY: LABOUR MARKET

2006-2007 Priorities

- Working with provinces, territories and stakeholders to ensure that labour market programming is coherent, comprehensive and flexible
- Provide advice on Employment Insurance income support to ensure it remains well suited to the needs of Canada's economy and workforce
- Build more effective partnerships to improve Aboriginal labour market outcomes
- Develop approaches to reduce barriers and help vulnerable Canadians, such as youth at-risk, disabled and older workers, participate in the labour market

Program Activity Expected Results

- Unemployed Canadians who qualify under the Employment Insurance Act are supported while they look for work, facilitating a smooth, and effective labour market transition
- Individuals are able to balance work and family responsibilities
- A resilient and adaptable workforce with smooth labour market transitions between school and work between unemployment and reemployment
- Challenges of a changing labour market are mitigated through new strategies: older workers
- Employers who are able to find skilled workers and thus improve their productivity and competitiveness
- Effective partnerships with labour market partners

Program Indicators

- Percentage of unemployed targeted by the Employment Insurance program eligible to collect regular Employment Insurance benefits
- Rate of participation of designated groups (self-identified) and older workers in Employment Benefits and Support Measures (EBSM)
- Proportion of regular entitlement collected by Employment Insurance claimants (%)
- Proportion of Employment Insurance maternity/parental entitlement collected by Employment Insurance claimants
- Number of youth clients who return to school or become employed following an employment program intervention under the Youth Employment Strategy and proportion of these clients on the total number of action plans closed
- Number of Aboriginal clients who return to school or become employed following an employment program intervention under the Aboriginal Human Resources Development Strategy and proportion of these clients on the total number of action plans closed
- Number of clients employed or self-employed following an employment program intervention, and proportion of these clients on total number of action plans closed

Programs

- Employment Insurance Income Benefits
- Employment Benefits and Support Measures
- Labour Market Development Agreements
- Aboriginal Human Resources Development Strategy
- Aboriginal Skills and Employment Partnerships
- Youth Employment Strategy
- Labour Market Adjustment
- Official Language Minority Communities

Resources

PLANNED SPENDING: : \$16,504.5 M

FTE: 13,377

LABOUR MARKET: PROGRAMS SUPPORTING PRIORITIES

The Labour Market program activity comprises Employment Insurance and Employment Programs and Services.

Employment Insurance: promotes individual well-being and economic stability, and facilitates smooth labour market transition by providing temporary financial assistance to unemployed Canadians while they look for work or upgrade their skills. Canadians who must take time off work for illness, pregnancy or to care for a newborn or adopted child, as well as those who must care for a family member who is seriously ill with a significant risk of death, may also be assisted by Employment Insurance. Temporary income support is provided to unemployed workers under Part I of the *Employment Insurance Act*.

Employment Programs and Services: enable Canadians, including unemployed adults and individuals facing barriers to employment, such as youth, displaced older workers and Aboriginal Canadians, to develop their skills, maintain or improve their employment and earnings, and become more adaptable to labour market changes. These programs and services strengthen Canadians' participation in a dynamic labour market and are funded through the Consolidated Revenue Fund and Part II of the *Employment Insurance Act*.

Employment Insurance Income Benefits: This program provides temporary financial assistance to unemployed Canadians (including self-employed fishers) while they look for work, participants in work-sharing agreements, and to Canadians who need to take a temporary absence from work for sickness, pregnancy and childbirth, caring for a newborn or adopted child, or to provide care or support to a gravely ill family member with a significant risk of death. Through an Agreement with the Government of Canada, as of January 2006, the province of Quebec provides its own maternity and parental coverage for its residents, rather than through the Employment Insurance program.

Employment Benefits and Support Measures (EBSMs) and Labour Market Development Agreements (LMDAs): Part II of the *Employment Insurance Act* authorizes the design and implementation of EBSMs to help unemployed participants prepare for, find and keep employment.

http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/gc.shtml

Under the authority of the *Employment Insurance Act*, LMDAs have been signed with all provinces and territories, including a recent agreement with Ontario to be implemented on January 1, 2007. Eight of these agreements are in the form of a transfer agreement under which six provinces and two territories have assumed responsibility for the design and delivery of provincial/territorial programs and services similar to EBSMs. Under co-management LMDAs in four provinces and one territory, the EBSMs are designed and managed jointly among Service Canada, HRSDC and the provinces/territory. Pan-Canadian programs maintained under HRSDC management are available to address labour market issues and priorities that are national or multi-regional in scope.

http://www.hrsdc.gc.ca/en/epb/sid/cia/grants/ebism/section_63.shtml

Aboriginal Human Resources Development Strategy (AHRDS): The AHRDS is designed to assist Aboriginal people to prepare for, find and keep employment and builds Aboriginal capacity for human resources development. The AHRDS is delivered through agreements with 80 Aboriginal Human Resource Development Agreements holders across the country. The AHRDS integrates most of HRSDC's Aboriginal programming.

http://www17.hrdc-drhc.gc.ca/AHRDSInternet/general/public/HomePage1_e.asp

Aboriginal Skills and Employment Partnerships (ASEP): Complementary to the AHRDS, ASEP is a nationally managed program geared toward supporting collaboration among Aboriginal groups, the private sector and provincial/territorial governments. The goal of ASEP is to ensure sustainable employment for Aboriginal people in major economic opportunities, leading to long-term benefits for Aboriginal communities, families and individuals.

http://www17.hrdc-drhc.gc.ca/AHRDSInternet/general/public/asep/asep_e.asp

Youth Employment Strategy (YES): The YES programs ensure that Canada's youth are well prepared to participate and succeed in today's changing labour market. The Strategy is delivered in partnership with the private sector and non-governmental organizations through the collective efforts of thirteen federal departments, agencies and corporations, with HRSDC in the lead role in collaboration with Service Canada. Under the Strategy, youth employment initiatives target youth from 15 to 30 years of age who are unemployed or underemployed. This national strategy offers a broad range of initiatives under three programs: Skills Link, Summer Work Experience and Career Focus. <http://www.youth.gc.ca>

Labour Market Adjustment activities are intended to support the objectives of an integrated labour market system and to ensure the right tools are in place to meet the needs of a flexible and expanding labour market.

Official Language Minority Communities : HRSDC helps to sustain the vitality of Official Language Minority Communities through a horizontal departmental initiative that provides policy direction and analysis across programs. The initiative's objective is to enhance human resources development, increase employability and community capacity building for the official language minority communities. The Department has six key priorities to address according to the Government of Canada Action Plan for Official Languages: Literacy, Youth Internships, the Enabling Fund, Integration of French-speaking immigrants into the Canadian Labour Market, Child Care Pilot Projects and Non governmental Organizations.

http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/solmc.shtml

LABOUR MARKET: FINANCIAL AND HUMAN RESOURCES – PLANNED SPENDING

Financial and Human Resources			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Gross Operating Expenditures	1,324.2	1,322.4	1,320.9
Non-Statutory Grants and Contributions	552.3	536.6	504.4
Statutory Transfer Payments	0.2	0.2	0.2
Total Gross Expenditures	1,876.7	1,859.2	1,825.5
EI Part I - Income Benefits	12,442.0	13,058.0	13,661.0
EI Part II - Employment Benefits and Support Measures	2,137.5	2,143.1	2,143.6
Government Annuities and Civil Service Insurance Payments	48.3	45.4	42.7
Total	16,504.5	17,105.7	17,672.8
Human Resources			
Full Time Equivalents	13,377	13,310	13,289

Details by Programs and Services

	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Employment Insurance			
Benefits	12,442.0	13,058.0	13,661.0
Allocated Corporate Services ^a	269.4	277.5	281.6
Other ^b	658.4	650.0	644.4
Sub-Total	13,369.8	13,985.5	14,587.0
Labour Market Programs			
Employment Benefits and Support Measures	1,353.8	1,350.1	1,350.6
Labour Market Development Agreements Transfers	987.0	987.0	987.0
Aboriginal Human Resources Development Strategy	271.3	264.4	263.5
Aboriginal Skills and Employment Partnerships	30.3	21.1	-
Youth Employment Strategy	321.1	321.4	321.4
Labour Market Adjustments	11.2	11.2	11.2
Official Language Minority Communities	13.6	13.5	-
Allocated Corporate Services ^a	131.2	136.2	136.8
Other ^c	15.2	15.3	15.3
Sub-Total	3,134.7	3,120.2	3,085.8
Total^d	16,504.5	17,105.7	17,672.8
Human Resources			
Full Time Equivalents	13,377	13,310	13,289
<p>^a Corporate Services resources related to the Minister's Office, the Deputy Minister's Office, the Comptroller's Office and the Shared Services have been prorated to each Strategic Outcome.</p> <p>^b This category includes resources related to claim processing, Employment Insurance premium collection, appeals, investigation and control, program management and service improvement.</p> <p>^c Other category is for the resources which are not directly related to the sub-activities identified.</p> <p>^d This amount includes \$1,259.9 million (13,240 FTEs) in 2006-2007, \$1,246.2 million (13,138 FTEs) in 2007-2008 and \$1,252.7 million (13,086 FTEs) in 2008-2009, for the delivery of programs and services by Service Canada. For a full accounting of Service Canada's operations please refer to the Strategic Outcome, "Achieve better outcomes for Canadians through service excellence".</p>			

Labour Market Program Activity – Modifications from the 2005-2006 Program Activity Architecture:

- The former program activities Employment Insurance and Employment Programs have been moved to the sub-activity level and placed under the new program activity Labour Market.
- The former program name Employment Programs has been changed to Labour Market Programs.
- The former activity Claims Processing has been subsumed under the activity Processing, located under the program activity Integrity – supporting the strategic outcome related to Service Canada.
- The former sub-activities Employment Insurance Premium Collection, Appeals, Investigation and Control and the Program Management part of Program Management and Service Improvement have been subsumed under a residual category called Other – Labour Market.
- The Service Improvement portion of the former sub-activity Program Management and Service Improvement has been subsumed under the program activity Seamless, Citizen-Centered Service – supporting the strategic outcome related to Service Canada.

PROGRAM ACTIVITY: WORKPLACE SKILLS

Enhancing the competitiveness of Canadian workplaces is essential to ensuring Canada's productivity and improving quality of life. Skilled workers can help drive improvements in productivity, as they are better able to process information, perform tasks more efficiently and effectively, and adapt to and use new technology. They are also more skilled at generating innovations in information, products, services, and production and distribution processes.

An integrated workplace skills strategy should be a key component in achieving this strategic outcome. This strategy needs to be business demand-driven and bring together a broad range of programs, services and partners – provinces, employers and labour – to address the need for innovative responses to skills issues.

Focusing on employers, employed workers and immigrants, workplace skills development has several overarching objectives for Canada that are integral to the broader economic agenda and economic union: a flexible, efficient labour market; a skilled, adaptable and resilient workforce; and programs and services that reflect and respond to employers' needs for skilled workers.

Strategic outcome indicators

INDICATORS	CURRENT LEVEL
Percentage of adult workforce who participated in job-related formal training	2002 34.7%
Percent of adult workforce who participated in employer-supported job-related training	2002 25.0%
Average earnings of recent immigrant university graduates as a percentage of the earnings of Canadian-born university graduates	2000 65.0%

A workplace skills strategy needs to promote the achievement of positive workplace skills outcomes through programs and services such as those related to sectoral initiatives, apprenticeship and the skilled trades (for example, an incentive grant for first and second year apprentices in the Red Seal trades), labour mobility, foreign credential recognition and use, essential skills, and the development, dissemination and coordination of skills and labour market information and related activities.

WORKPLACE SKILLS: PRIORITIES AND PLANS

Priority: Articulating an integrated workplace skills strategy by working with provinces, territories, key government departments and stakeholders in advancing multiple activities that include trades and apprenticeship, foreign credential recognition, labour market information, as well as sectoral initiatives.

Plans:

- Further developing and strengthening Foreign Credential Recognition initiatives, including the proposed Canadian Agency for Assessment and Recognition of Foreign Credentials
- Implementation of the Trades & Apprenticeship Strategy including the Apprenticeship Incentive Grant
- Continuing to work with provinces and territories to improve inter-provincial labour mobility under the *Agreement on Internal Trade*
- Further developing and strengthening the Workplace Literacy and Essential Skills Initiative
- Refining and broadening the impact of the Sector Council Program, testing new and innovative approaches to sectoral skills development
- Take first steps to develop common core curriculum standards for Red Seal trades, with the goal of improving the labour mobility of apprentices in Canada.
- Through the Forum of Labour Market Ministers Labour Market Information Working Group, continue working on issues of common interest to provide Canadians with quality labour market information

Strategic Outcome

Enhanced Canadian productivity and participation through effective and inclusive labour markets, competitive workplaces and access to learning

PROGRAM ACTIVITY: WORKPLACE SKILLS

2006-2007 Priorities

- Articulate an integrated workplace skills strategy by working with provinces, territories, key government departments and stakeholders in advancing multiple activities that include trades and apprenticeship, foreign credential recognition, labour market information, as well as sectoral initiatives

Program Activity Expected Results

- Better understanding of workplace-related learning and needs by all stakeholders
- Enhanced utilization of existing skills in labour market
- Increase Pan-Canadian consistency of skills recognition processes and requirements
- Increased commitment of stakeholders towards workplace-related learning

Program Indicators

- Number of apprentices that received the Apprenticeship Incentive Grant
- Increase in the number of trades people who are fully mobile in Canada through Red Seal endorsement
- Number of tools and processes completed to be used in verifying and recognizing foreign credentials and work experience of foreign trained professionals

Programs

- Trades and Apprenticeship
- The Interprovincial standards "red seal" Program
- Training Center Infrastructure Fund
- Workplace Skills Initiative
- Workplace Partners Panel
- Immigration Portal
- Foreign Worker Program
- Interprovincial Labour Mobility
- Skills and Labour Market Information
- National Occupational Classification
- Essential Skills
- Labour Market Information
- Sector Council Program

Resources

PLANNED SPENDING: : \$219.3 million

FTE: 908

WORKPLACE SKILLS: PROGRAMS SUPPORTING PRIORITIES

The Workplace Skills program activity supports the collaboration of industry partners and stakeholders in identifying, addressing and promoting workplace skills development and recognition issues that reflect the realities of Canadian workplaces in our rapidly evolving labour market. It also develops and disseminates knowledge and information, which is vital in supporting and contributing to a well-functioning labour market.

Workplace Partnerships: Workplace Partnerships advance partnerships with industry and the learning system to ensure that Canadians have the skills and knowledge required for the workplace. The activities are divided into six main business lines/programs.

Sector Council Program supports knowledge and project-based activities proposed by Sector Councils, as well as national sector-like organizations working on skills and learning issues.

http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/spi.shtml

Trades and Apprenticeship: the Directorate will continue to implement the Trades and Apprenticeship Strategy and work with Service Canada to implement the Apprenticeship Incentive Grant. The Directorate will also continue to work with the provinces and territories through the Canadian Council of Directors of Apprenticeship (CCDA) to facilitate and increase the labour mobility of skilled trades workers; and to work with public and private sector partners and stakeholders to strengthen apprenticeship systems in Canada enabling them to respond more effectively to the demands of the knowledge-based economy. http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/almi.shtml

The Interprovincial Standards "Red Seal" Program is designed to facilitate mobility through interprovincial certification based on national occupational standards and examinations for the 45 "Red Seal" trades. It also encourages standardization of provincial and territorial apprenticeship training and certification programs. Apprentices who have completed their training and certified journeypersons are able to obtain a "Red Seal" endorsement on their Certificates of Qualification and Apprenticeship Completion by successfully completing an Interprovincial Standards "Red Seal" Examination.

http://www.red-seal.ca/Site/index_e.htm

The Training Centre Infrastructure Fund (TCIF) is a three-year pilot project to encourage, through federal funding, increased investment by unions and employers in purchasing up-to-date training equipment for union-employer training centres. <http://www.hrsdc.gc.ca/en/hip/hrp/tcif/index.shtml>

The Workplace Skills Initiative (WSI) will support partnership-based projects testing and evaluating innovative, outcomes-focused approaches to skills development for employed Canadians. WSI support will be available to proponents from across the spectrum of workplace partners.

<http://www.hrsdc.gc.ca/en/ws/initiatives/wsi/index.shtml>

The Workplace Partners Panel (WPP) will provide Canadian industry and the Government of Canada with a forum to exchange perspectives and intelligence, and a research capacity focused on workplace skills issues. It will be charged with galvanizing Canada's industry, educational partners and governments to integrate the workplace into Canada's learning system.

The Foreign Workers and Immigrants Program helps internationally-trained individuals integrate and participate effectively in the Canadian labour market, as well as enhancing interprovincial mobility of internationally and domestically trained workers. This work is done in conjunction with Provincial and Territorial partners and stakeholders across Canada, including other federal departments, industry, and regulatory bodies. The activities are divided into four main business lines/programs.

Foreign Credential Recognition will support knowledge and project-based activities proposed by Sector Councils, industry groups, regulatory bodies, provinces/territories, and educational bodies, working on foreign credential assessment and recognition issues.

<http://www.hrsdc.gc.ca/asp/gateway.asp?hr=en/ws/programs/fcr/index.shtml&hs=hzp>

Immigration Portal enhances the *Going to Canada* website by providing prospective immigrants, students, workers and newcomers with information, services and tools to help them make informed decisions about coming to Canada and facilitate their integration into Canada's labour market and society.
<http://www.directioncanada.gc.ca/>

Foreign Worker Program assists Canadian employers in meeting their human resource needs by facilitating the entry of temporary foreign workers into areas of the labour market with demonstrated occupational shortages, while still considering the employers' efforts to hire and recruit Canadians.
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/fw_shtml

Interprovincial Labour Mobility co-ordinates federal activity to improve interprovincial labour mobility under the Agreement on Internal Trade, so that workers who qualify in one province/territory can have their qualifications recognized in another.

Skills and Labour Market Information (SLMI): SLMI is available to help employed and unemployed job seekers, people choosing a career, career practitioners, employment service providers, employers, education/learning institutions, and community development organizations in making informed decisions related to skills, human resources and the labour market. LMI and related products and services contribute to a well-functioning labour market. The activities are divided into three main business lines.

National Occupational Classification (NOC) provides a standardized language for describing the work performed by Canadians in the labour market and continues to be the authoritative resource on occupational information in Canada. The NOC contains the classification structure and descriptions of 520 occupational unit groups and includes over 30,000 occupational titles.
http://www.sdc.gc.ca/en/hip/hrp/noc/noc_index.shtml

Essential Skills required for work, home and community, provide the foundation for learning all other skills, such as job-related technical skills, thus enabling people to evolve with their jobs and adapt to workplace and workforce changes. The Essential Skills Initiative aims to improve the essential skills levels of Canadians who are entering – or already in – the labour market. The starting point is the development of profiles that show how Essential Skills are used in various occupations and their level of complexity, and provide samples of authentic workplace materials used on the job. Partnerships with provinces/territories and other workplace stakeholders help to increase the knowledge base of Essential Skills; promote understanding and their greater utilization in the workplace; and develop tools and other resources to facilitate their integration into the workplace.
http://www.hrsdc.gc.ca/en/hip/hrp/essential_skills/essential_skills_index.shtml

Labour Market Information (LMI) develops policies to contribute to the enhancement of skills and labour market information and the Pan-Canadian consistency of LMI content, products and services. Through Service Canada, it also provides information on: national and regional employment trends; local employment prospects; wage rates; skills and education required by occupation; employment and training opportunities. Service Canada also offers job posting, job search, job alert and job matching services to job seekers and employers.
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/lmi.shtml
<http://www.jobbank.gc.ca>
<http://www.labourmarketinformation.ca>

WORKPLACE SKILLS: FINANCIAL AND HUMAN RESOURCES — PLANNED SPENDING

Financial and Human Resources			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
<i>Financial Resources (in millions of dollars)</i>			
Gross Operating Expenditures	102.9	102.5	80.1
Non-Statutory Grants and Contributions	116.4	191.3	153.9
Total	219.3	293.8	234.0
<i>Human Resources</i>			
Full Time Equivalents	908	896	784

Details by Programs and Services			
	2006-2007	2007-2008	2008-2009
<i>Financial Resources (in millions of dollars)</i>			
Workplace Partnerships	127.3	192.6	146.0
Foreign Workers and Immigrants	22.6	30.5	26.9
Skills and Labour Market Information	33.6	33.9	34.7
Allocated Corporate Services ^a	29.6	30.5	23.6
Other	6.2	6.3	2.8
Total^b	219.3	293.8	234.0
<i>Human Resources</i>			
Full Time Equivalents	908	896	784

^a Corporate Services resources related to the Minister's Office, the Deputy Minister's Office, the Comptroller's Office and the Shared Services have been prorated to each Strategic Outcome.

^b This amount includes \$53.1 million (695 FTEs) in 2006-2007, \$52.6 million (691 FTEs) in 2007-2008 and \$50.7 million (694 FTEs) in 2008-2009, for the delivery of programs and services by Service Canada. For a full accounting of Service Canada's operations please refer to the Strategic Outcome, "Achieve better outcomes for Canadians through service excellence".

Workplace Skills Program Activity – Modifications from the 2005-06 Program Activity Architecture:

- The former sub-activity Human Resources Partnerships has been changed to Workplace Partnerships.
- The activity National Occupational Classification has been moved from Human Resources Partnerships (now Workplace Partnerships) to Skills and Labour Market Information.
- The Workplace Skills Initiative and Workplace Partners Panel are new programs, located at the sub-sub activity level, under Workplace Partnerships.
- The Foreign Worker Program has been moved to the new activity, Foreign Workers and Immigrants.
- The Immigration Portal and Interprovincial Labour Mobility are new programs and have been placed under the sub-activity Foreign Workers and Immigrants.

PROGRAM ACTIVITY: LEARNING

Lifelong learning is vital to the well-being of individual Canadians as well as to the productivity, competitiveness and prosperity of Canada. The knowledge-based economy has increasingly been creating jobs that require a higher level of education and skills. In the future, it is estimated that about two thirds of all new jobs created over the next ten years will be in management or require some form of post-secondary education. This reality requires a concerted focus on supporting a highly skilled and adaptive labour force.

Many Canadians, however, have skill levels below what is needed to function in the knowledge-based economy. According to the 2003 Adult Literacy and Lifeskills Survey (ALLS), 42% of working-age Canadians score below the literacy level which is considered the minimum to cope in today's economy and society.¹⁵ This rate has not changed since 1994.¹⁶ Increasing the skill levels of all Canadians will be key to Canada's continued prosperity.

HRSDC helps Canadians gain access to the learning opportunities they need to participate more fully in a knowledge-based economy and society. The Department fosters a culture of lifelong learning by: promoting awareness of the importance of lifelong learning and the need to save for post-secondary education; facilitating access for students to post-secondary education and adult learning opportunities; collaborating with provincial and territorial governments and other key stakeholders on the delivery of learning programs and services; and strengthening the capacity of key learner support organizations.

As part of this mandate, the Department manages a Horizontal Initiative, the Canada Student Loans Program,¹⁷ and currently has agreements with four foundations.¹⁸ Three of these foundations, including the Canada Millennium Scholarship Foundation, were provided one-time funding in prior years, and one, the *Winnipeg Foundation*, has received cost-matched funding on an annual basis ending September 30, 2006.

Strategic outcome indicators		
INDICATORS	CURRENT LEVEL	
Percentage of population with post-secondary diplomas/degrees	2004 25-64 year-olds = 44.6% 25-34 year-olds = 53.3% 35-64 year-olds = 41.8%	
Percentage of adult population (aged 25-64) who participated in adult learning opportunities	2002 36.7%	
Post-secondary participation of 18-21 year-olds by family after-tax income quartile when youth were age 16	Family After-tax Income Quartile	PSE Participation (2001) University College
	Lowest	21% 30%
	Lower-middle	25% 32%
	Upper-middle	30% 37%
	Highest	38% 30%
	Overall	29% 32%
Proportion of adults who were attending university or college, by age group	Age Groups	Percentage (Oct 2005)
	25-34	9.5%
	35-44	3.5%
	45-54	1.6%
	55-64	0.6%
	Overall, 25-64	3.9%

¹⁵ Adult Literacy and Lifeskills Survey, 2003 <http://nces.ed.gov/surveys/all/>

¹⁶ International Adult Literacy Survey, 1994 <http://www.statcan.ca/8096bsolc/english/bsolc?catno=89-588-X1E>

¹⁷ Horizontal Initiatives website: http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_e.asp

¹⁸ Foundations website: http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_e.asp

LEARNING: PRIORITIES AND PLANS

Priority: Continue to assess policy and program options to address financial and non-financial barriers to post-secondary education and to lifelong learning

Plans:

- Ongoing review of the Canada Student Loans Program, including consideration of the needs assessment process
- Implementation of the Budget 2006 parental contribution change as it relates to the Canada Student Loans Program
- Complete review of supports for debt management and assistance to part-time learners
- Continue diagnostic work with the provinces and territories on the appropriate mix of loans, grants, and debt management instruments to address the needs of students from low and middle-income households

Priority: Implement the Adult Learning, Literacy and Essential Skills Program and finalize the implementation of the Canada Learning Bond

Plans:

- Complete the development of, and implement, a Adult Learning, Literacy, and Essential Skills Program integrating and building on the strengths of the National Literacy Program, the Office of Learning Technologies, and the Learning Initiatives Program, with common objectives, outcomes, and processes
- Strengthen federal leadership in promoting lifelong learning, literacy and essential skills development and reducing non-financial barriers to learning by increasing public awareness, building the research and knowledge base for long-term change, supporting learning initiatives in areas of federal priority, and enhancing accountability and outcome measurement
- Implement measures to increase Canadians' awareness of the Canada Learning Bond, and the importance of planning and saving for post-secondary education, including the Education Savings Incentive Pan-Canadian Community Outreach
- Continue working with the Province of Alberta to deliver the Alberta Centennial Education Savings Plan

Strategic Outcome

Enhanced Canadian productivity and participation through effective and inclusive labour markets, competitive workplaces and access to learning

PROGRAM ACTIVITY: LEARNING

2006-2007 Priorities

- Continue to assess policy and program options to address financial and non-financial barriers to post-secondary education access and to lifelong learning
- Implement the Adult Learning, Literacy and Essential Skills Program and finalize the implementation of the Canada Learning Bond

Program Activity Expected Results

- Reduced financial barriers to participation in post-secondary education
- Reduced non-financial barriers to participation in adult learning
- Increased awareness of the benefits of lifelong learning and literacy
- Increase access to international education

Program Indicators

- 3-year loan default rate (direct loans only for 2006-2007)
- Number of Canadians who have ever received a Canada Education Savings Grant and who are attending post-secondary education in the current fiscal year
- Percentage of Canadians under 18 years of age who have ever received a Canada Education Savings Grant
- Percentage of children eligible for the Canada Learning Bond who have a Registered Education Savings Plan
- Client satisfaction with the overall quality of services provided by the Canada Student Loans Program
- Client (Registered Education Savings Plan Providers) satisfaction with the overall quality of services provided by the Canada Education Savings Program

Programs

- Student Financial Assistance
- Canada Education Savings Program
- Adult Learning, Literacy and Essential Skills Program
- International Academic Mobility

Resources

PLANNED SPENDING : \$ 2,208.7 million

FTE: 589

LEARNING: PROGRAMS SUPPORTING PRIORITIES

The Learning program activity supports the Government of Canada's significant investments in assisting Canadians, throughout their lives, to acquire the education and skills that will enable them to participate more fully in a knowledge-based economy and society. Programs in this area are delivered by HRSDC nationally and include grant and loans programs to promote access to and encourage savings for post-secondary education, and grants and contributions programs related to international student mobility, adult learning, literacy and essential skills.

Student Financial Assistance: Canada Student Loans Program (CSLP), The Canada Access Grants (CAG) and the Canada Study Grants: The CSLP, including CAG and CSG, promotes accessibility to post-secondary education for those with a demonstrated financial need by lowering financial barriers through the provision of loans and grants. The Program also offers to borrowers debt management measures to help with repayment such as Interest Relief, Debt Reduction in Repayment and loan forgiveness in the event of the permanent disability or death of a qualified borrower.

<http://www.hrsdc.gc.ca/en/gateways/topics/cxp-gxr.shtml> and <http://www.canlearn.ca/cgi-bin/gateway/canlearn/en/parent.asp>

Canada Education Savings Program (CESP): Canada Education Savings Grant and the Canada Learning Bond (CLB): The CESG and the CLB encourage Canadians to save for the post-secondary education of children through Registered Education Savings Plans (RESPs) by providing grants. The CLB is designed specifically to help low-income Canadian families to acquire education savings for their children. <http://www.hrsdc.gc.ca/en/gateways/topics/cgs-gxr.shtml>

Adult Learning, Literacy and Essential Skills Program (ALLESP): On March 23, 2006, Treasury Board approved the integration of three of its grants and contributions programs into a single coherent program. The Adult Learning, Literacy and Essential Skills Program brings together the National Literacy Program, the Office of Learning Technologies and the Learning Initiatives Program under one set of Terms and Conditions. ALLESP will work to reduce non-financial barriers to adult learning through the following four program streams:

- Support generation, transfer, and application of knowledge in adult learning, literacy and essential skills
- Contribute to the development of innovative approaches in adult learning, literacy and essential skills
- Strengthen capacity of the adult learning, literacy and essential skills sectors
- Promote adult learning, literacy and essential skills

<http://www.hrsdc.gc.ca/en/hip/lld/olt/ADULTLESP.shtml>

International Academic Mobility (IAM) initiative: The International Academic Mobility program advances the development of international skills, knowledge and understanding among students and promotes academic cooperation and institutional links among colleges and universities.

http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/iam.shtml

LEARNING: FINANCIAL AND HUMAN RESOURCES – PLANNED SPENDING

Financial and Human Resources			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Gross Operating Expenditures	162.5	159.0	163.4
Non-Statutory Grants and Contributions	45.1	50.6	35.9
Statutory Transfer Payments	1,019.6	998.4	1,022.1
Total Gross Expenditures	1,227.2	1,208.0	1,221.4
Loans disbursed under the <i>Canada Student Financial Assistance Act</i>	981.5	769.1	560.8
Total	2,208.7	1,977.1	1,782.2
Human Resources			
Full Time Equivalents	589	514	496

Details by Programs and Services			
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Student Financial Assistance	1,486.2	1,278.2	1,076.7
Canada Education Savings Program	634.2	610.3	634.4
Adult Learning, Literacy and Essential Skills Program	51.8	57.0	41.0
International Academic Mobility	4.0	4.0	4.0
Allocated Corporate Services ^a	25.0	22.6	21.9
Other	7.5	5.0	4.2
Total	2,208.7	1,977.1	1,782.2
Human Resources			
Full Time Equivalents	589	514	496

^a Corporate Services resources related to the Minister's Office, the Deputy Minister's Office, the Comptroller's Office and the Shared Services have been prorated to each Strategic Outcome.

Learning Program Activity – Modifications from the 2005-2006 Program Activity Architecture:

- Under the sub-activity Student Financial Assistance, the former sub-sub activity Canada Study Grants has been changed to Grants and now includes the Canada Access Grant and the Canada Study Grant.
- The former sub-activity Canada Education Savings Programs now includes the Canada Learning Bond and the Canada Education Savings Grant.
- The Adult, Learning and Essential Skills Program combines three former programs (the National Literacy Secretariat, the Office of Learning Technologies and the Learning Initiatives Program) under one set of terms and conditions.

Strategic Outcome

SAFE, HEALTHY, FAIR, STABLE, COOPERATIVE, PRODUCTIVE WORKPLACES AND EFFECTIVE INTERNATIONAL LABOUR STANDARDS

PROGRAM ACTIVITY: LABOUR

Canada's ability to compete internationally and to provide secure, rewarding jobs domestically depends on highly productive workplaces. Essential to creating such workplaces is striking the right balance among the interests of employees, organized labour and employers in Canada, combined with effective and modern labour legislation and regulations that establish the basic structure of the employment relationship between employers and employees.

In support of this strategic outcome, the Labour Program acts to ensure that Canadians work in healthy, safe, fair, stable, cooperative and productive work environments that contribute to the social and economic well-being of all Canadians, and that the international economy increasingly respects fundamental labour rights.

During the 2006-2007 fiscal year, the Labour Program will be focusing its energies on a number of activities. The independent and comprehensive review of Part III (Labour Standards) of the *Canada Labour Code* will generate recommendations so that federal employment standards can respond to the changing world of work. Recommendations for legislative and non-legislative options will be submitted to the Minister of Labour.

A review of the Federal Workers' Compensation System will provide the framework for effective prevention strategies and claims management to reduce the incidence and impact of workplace injuries.

As a statutory requirement, the *Employment Equity Act* is reviewed by Parliament every five years, with the next review expected during 2006. The review is conducted by the Standing Committee responsible for the Act. Federal partners, such as the Canadian Human Rights Commission and the Public Service Human Resources Management Agency collaborate in the review. It is expected that the Minister of Labour will present a five-year report, which would include a summary of progress since the last review.

The *Wage Earner Protection Act* was adopted in November, 2005, to restore wages and vacation pay owed to unpaid workers whose employers are declared bankrupt or are subject to receivership under the *Bankruptcy and Insolvency Act*. The Act is not yet in force and work remains to be done involving the Labour Program and Service Canada, as well as provincial labour ministries, to design and implement the program.

Strategic outcome indicators

INDICATORS	LEVEL																				
Percentage of total working days lost due to work stoppages (federal jurisdiction)	(2004) less than 1%																				
Representation of designated groups in all occupations and workforce availability, employers covered under the Legislated Employment Equity Program	<table> <tr> <th colspan="2">Representation of Designated Groups (2004)</th></tr> <tr> <td>Women</td><td>43.4%</td></tr> <tr> <td>Aboriginal Peoples</td><td>1.7%</td></tr> <tr> <td>Visible Minorities</td><td>13.5%</td></tr> <tr> <td>People with Disabilities</td><td>2.5%</td></tr> <tr> <th colspan="2">Workforce Availability (2001)</th></tr> <tr> <td>Women</td><td>47.3%</td></tr> <tr> <td>Aboriginal Peoples</td><td>2.6%</td></tr> <tr> <td>Visible Minorities</td><td>12.6%</td></tr> <tr> <td>People with Disabilities</td><td>5.3%</td></tr> </table>	Representation of Designated Groups (2004)		Women	43.4%	Aboriginal Peoples	1.7%	Visible Minorities	13.5%	People with Disabilities	2.5%	Workforce Availability (2001)		Women	47.3%	Aboriginal Peoples	2.6%	Visible Minorities	12.6%	People with Disabilities	5.3%
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Women	47.3%																				
Aboriginal Peoples	2.6%																				
Visible Minorities	12.6%																				
People with Disabilities	5.3%																				

LABOUR: PRIORITIES AND PLANS

Priority: Complete a comprehensive review of Part III (Labour Standards) of the Canada Labour Code

Plans:

- Receive the final report from the independent Commissioner
- Develop policy options in response to the recommendations

Priority: Develop policy options for a modernized Federal Workers' Compensation System including a Federal Disability Management Strategy

Plans:

- Complete research and other preparations required to reform the system

Priority: Complete preparations for the Wage Earner Protection Program

Plans:

- Draft regulations and prepare for implementation of the new Act

Priority: Parliamentary review of the Employment Equity Act

Plans:

- Draft the Minister of Labour's five-year report, which would include a socio-economic analysis of current conditions among the designated groups, a presentation of program administrative data on progress, and accomplishments towards the recommendations made by the Committee in the previous review

Strategic Outcome

Safe, healthy, fair, stable, cooperative, productive workplaces and effective international labour standards

PROGRAM ACTIVITY: LABOUR

2006-2007 Priorities

- Complete a comprehensive review of Part III (Labour Standards) of the *Canada Labour Code*
- Develop policy options for a modernized Federal Workers' Compensation System including Federal Disability Management Strategy
- Complete preparations for the Wage Earner Protection Program
- Parliamentary review of the *Employment Equity Act*

Program Activity Expected Results

- Conservative and stable labour-management relations in federally-regulated workplaces
- Safe, healthy and fair federally-regulated workplaces
- Increased awareness of occupational health and safety practices and regulations
- Fulfillment of Canada's international labour commitments
- Increased cooperation and consensus on national and international labour issues through promotion of dialogue among federal, provincial and territorial governments and among government and employer and worker organizations

Program Indicators

- Percentage of collective bargaining disputes settled under Part I (Industrial Relations) of the *Canada Labour Code* without work stoppages
- Percentage of unjust dismissal complaints settled by inspectors (Part III of the *Canada Labour Code*)
- Disabling Injury Incidence Rate (DIIR) measuring the change in the rate of lost time injuries, illnesses and fatalities within federal jurisdiction industries from year to year
- Percentage of money collected in relation to the amount found to be owed for complaints under Part III (Labour Standards) of the *Canada Labour Code* (excluding unjust dismissal complaints)
- Client satisfaction with the quality of Workplace Information Directorate data

Programs

- Federal Mediation and Conciliation Service
- National Labour Operations
- International and Intergovernmental Labour Affairs
- Workplace Policy and Information

Resources

PLANNED SPENDING: : \$249.2 million

FTE: 904

LABOUR: PROGRAMS SUPPORTING PRIORITIES

The Labour Program activity promotes and sustains stable industrial relations and a safe, fair, healthy, equitable and productive workplace within the federal labour jurisdiction. At the national level, it collects and disseminates labour and workplace information, undertakes policy development and promotes coordination among Canadian labour jurisdictions. Finally, it manages Canada's international labour affairs.

http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/labour.shtml

Federal Mediation and Conciliation Service: This service is responsible for providing dispute resolution and dispute prevention assistance to trade unions and employers under the jurisdiction of Part I (Industrial Relations) of the *Canada Labour Code*; and fosters constructive labour-management relationships economy-wide.

http://www.hrsdc.gc.ca/asp/gateway.asp?hr=en/lp/fmcs/11Federal_Mediation_and_Conciliation_Service.shtml&hs=

National Labour Operations: Through its National Headquarters and five Regions, this directorate is responsible for enforcement of laws and regulations under Part II (Occupational Health and Safety) and Part III (Labour Standards) of the *Canada Labour Code*, as well as the *Employment Equity Act*, Federal Contractors Program for Employment Equity, *Fair Wages and Hours of Labour Act*, and the *Non-smokers' Health Act*. National Labour Operations is also responsible for administering the *Government Employees' Compensation Act* and the *Merchant Seamen Compensation Act*. Additionally, it administers Fire Protection Services on behalf of the Treasury Board.

http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/labour.shtml

International and Intergovernmental Labour Affairs: This directorate promotes the development, observance and effective enforcement of internationally recognized labour principles, fosters cooperation and coordination among labour jurisdictions in Canada on national and international labour issues, and facilitates dialogue with program stakeholders.

http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/labour.shtml

Workplace Policy and Information: This directorate identifies emerging trends and changes in the workplace and provides policy development and leadership in labour policy, manages a national data base of collective agreements, conducts research on employment relationships, and disseminates key information, research and analysis. This directorate is also responsible for designing and implementing the Wage Earner Protection Program. Once finalized, funds for delivering the program will be transferred to Service Canada.

http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/labour.shtml

LABOUR: FINANCIAL AND HUMAN RESOURCES – PLANNED SPENDING

Financial and Human Resources			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Gross Operating Expenditures	90.6	92.9	93.2
Non-Statutory Grants and Contributions	3.9	3.9	3.9
Statutory Grants and Contributions	28.7	28.7	28.7
Workers' Compensation Payments	126.0	129.0	131.0
Total	249.2	254.5	256.8
Human Resources			
Full Time Equivalents	904	916	920

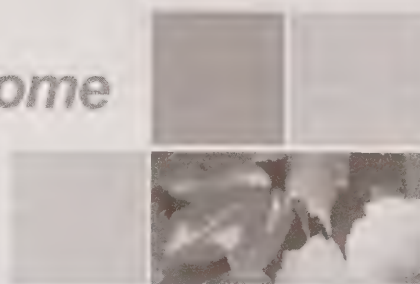
Details by Programs and Services			
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Federal Mediation and Conciliation Service	7.9	8.0	8.0
National Labour Operations	171.1	174.8	176.7
International and Intergovernmental Labour Affairs	5.9	5.9	5.9
Workplace Policy and Information	36.1	36.1	36.1
Allocated Corporate Services ^a	26.8	28.3	28.7
Other	1.4	1.4	1.4
Total	249.2	254.5	256.8
Human Resources			
Full Time Equivalents	904	916	920

^a Corporate Services resources related to the Minister's Office, the Deputy Minister's Office, the Comptroller's Office and the Shared Services have been prorated to each Strategic Outcome.

Labour Program Activity – Modifications from the 2005-2006 Program Activity Architecture

- The former sub-activities Intergovernmental Affairs and International Labour Affairs have been combined under a new program sub-activity called International and Intergovernmental Labour Affairs.
- The former program sub-activity Aboriginal Labour Affairs has been removed.

Strategic Outcome



ENHANCED INCOME SECURITY, ACCESS TO OPPORTUNITIES AND WELL-BEING FOR INDIVIDUALS, FAMILIES AND COMMUNITIES

Canada's economic prosperity, its vibrant labour market, and the positive outlook for our country's future are closely linked to the security and well-being of Canadians, their families and communities. The means by which individuals attain income security, care for and support a family and participate in their community contributes to the extent of their well-being and inclusion in Canadian society.

HRSDC continues to build and enhance social investments for Canadians. Core social programs that focus on children, seniors, people with disabilities and the homeless population are continuously being reassessed to ensure they continue to meet the changing needs of Canadians. Where gaps are identified, new programs are being developed to address the needs of Canadians – for example, Canada's Universal Child Care Plan, which is designed to provide families with choice in child care to help meet the needs of families with children under six years old.

Despite current economic successes, Canada still faces many social challenges that require our full attention and support. Individuals, families and communities are experiencing diverse impacts from a variety of different sources, such as changing family structures and dynamics, an aging population, the challenge of securing adequate income, and safe and affordable housing. HRSDC is working with stakeholders, provinces and territories to address and develop collaborative solutions to these challenges.

In support of this strategic outcome, HRSDC will focus its efforts on providing support to Canadians so they can enhance their income security, access to opportunities, and well-being. HRSDC's priorities and plans are reflected in three key program activities: Social Investment, Children and Families, and Housing and Homelessness.

PROGRAM ACTIVITY: SOCIAL INVESTMENT

HRSDC has a number of important programs that are vital to enhance social investments for Canadians. These programs are situated in the following areas: Seniors and Pensions; Disability Programs; Canada Pension Plan Disability; and Community Development and Partnerships.

Seniors and Pensions

HRSDC provides income support to seniors through the Canada Pension Plan (CPP) and the Old Age Security (OAS) benefit programs. The Department's stewardship of CPP and OAS ensures that 4.6 million seniors have a stable source of retirement income.

As the federal government focal point for seniors issues, HRSDC has established the Seniors and Pensions Policy Secretariat to coordinate efforts to define and address the issues and opportunities created by the growing seniors population. Actions to date include the work of the Federal/Provincial/Territorial Forum of Ministers Responsible for Seniors, the Interdepartmental Committee of federal government departments and agencies with responsibilities for seniors, and continuing efforts to engage seniors and stakeholder organizations on relevant matters to seniors.

In 2006-2007, HRSDC will continue to develop an action plan for seniors that considers the needs and opportunities presented by the current and future generations of seniors. In addition to this action plan, HRSDC will develop a Seniors Council to advise the Minister on issues of national importance.

Ongoing consideration of potential adjustments to Canada's public pensions will continue, to ensure that they meet the current and future social and economic needs of beneficiaries. These efforts will take place as part of the regular triennial review of the CPP, as well as activities that may culminate in legislation to amend the *Old Age Security Act*.

Efforts will also be directed to ensure that Canadians are well informed through awareness activities undertaken by Service Canada of Canada's retirement income system and their entitlements to benefits. Particular emphasis will be placed on reaching out to vulnerable communities (including homeless people, Aboriginal people living on-reserve, persons with incapacities, and immigrants), as well as younger Canadians, to ensure that they understand their role in saving for retirement.

With fifty international social security agreements now signed, efforts will be made to ensure that those existing agreements continue to serve the needs of seniors both in Canada and abroad. Canada's agreements with Estonia, Latvia and Lithuania were signed in 2005 and will enter into force on November 1, 2006. An agreement with Japan was signed early in 2006 and is expected to enter into force in late 2007. The Department is currently revising an existing agreement with Norway. In addition, HRSDC will continue to identify countries that have commensurate pension systems with which the Department can coordinate its benefits. In 2006-2007, these include Poland, Serbia, Macedonia and Israel.

Disability Programs

HRSDC is the lead department for the Government of Canada on matters affecting people with disabilities. The Office for Disability

Strategic outcome indicators

INDICATORS	CURRENT LEVEL
Number and proportion of individuals aged 65 years+, who had low family income	258,400 6.8% (2003)
Number and proportion of individuals aged 65 years+ who would have had low income without public support	1,995,800 52.4% (2003)
Average income by which low-income individuals aged 65+ fall short of the relevant LICO threshold if public pension support is removed	2003 \$3,488
Average combined annual CPP/OAS/GIS payments for persons over 65 years of age represented as percentage of annual Average Industrial Earnings	2005 40.5%
Proportion of income provided by the OAS program as a percentage of total post-retirement income for seniors	2003 23.1%
Proportion of income provided by the OAS program as a percentage of total post-retirement income for low-income seniors	2003 58.0%
Proportion of income provided by the CPP program as a percentage of total post-retirement income for seniors	2003 18%
Persons living in Canada receiving a benefit from another country as a result of a Social Security Agreement	2004 170,936
Contribution of the CPP-Disability Program to income support of beneficiaries as measured by total disability payments as a percentage of total net income received from all sources (measure every three years from tax data)	New measure to establish baseline

Issues (ODI) will provide a national focal point within the Government of Canada for partners working to promote the full participation of people with disabilities in all aspects of society and community life. HRSDC will strive to improve awareness, coherence, and horizontal management of disability issues within the Department, and across the Government of Canada. ODI will also serve as a model of accessibility for the federal government, and provide leadership by example to promote accessible workplaces throughout the government.

Through the development and release of the Federal Disability Report, and in collaboration with Statistics Canada on the Participation and Activity Limitation Survey 2006, HRSDC will support the development and sharing of knowledge on disability matters to inform policy and program development. HRSDC will also continue to build awareness and engage partners, citizens, and provincial and territorial partners in improving disability policy and programming.

CPP – Disability

The enhanced social and economic participation of people with disabilities is also supported through the disability benefits that are payable to eligible individuals under the Canada Pension Plan. The Canada Pension Plan Disability Program is Canada's largest long-term disability insurance plan. In 2005-2006, \$3 billion in benefits were paid to 291,000 individuals and 84,000 of their children. With respect to the Minister's responsibility for the CPP/OAS appeals system, ensuring a fair and timely resolution of reviews and appeals, and identifying improvements to the process, in consultation with the two arms-length administrative tribunals, remains a priority. Approximately 62,000 new applications were received in 2005-2006. Policy priorities focus on contributing to the disability component of the CPP Triennial Review regarding adjustments to Canada's public pensions to ensure they meet the current and future needs of beneficiaries. A continuum of supports is being re-designed to better assist beneficiaries who are trying to return to employment. Improving coordination mechanisms with private insurers, provincial social assistance and workers' compensation boards on behalf of mutual clients is an important priority. Building the research and evidence base of the Canada Pension Plan Disability Program will be accomplished through a number of priority activities in 2006-2007.

Community Development and Partnerships

HRSDC is committed to supporting non-profit community sector efforts to innovate, strengthen networks of collaboration, develop capacity and share good practices to contribute to community well-being. During 2006-2007, HRSDC will continue to work on a range of activities that are designed to assist communities through the Department's grants, contributions and various funding vehicles. For instance, the New Horizons for Seniors Program (NHSP) will continue to increase the social participation and contribution of seniors to their communities and reduce the isolation of vulnerable seniors.

The Understanding the Early Years Initiative (UEY) is currently underway in twenty-one communities across Canada. In 2006-2007 a number of new communities will be selected to participate in the UEY initiative.

HRSDC's Social Development Partnerships Program (SDPP) will continue to support non-profit community organizations that are concerned with advancing the social development needs of people with disabilities, children and their families, and other vulnerable or excluded populations in Canada.

The Department will continue to act on its commitment under the Official Languages Action Plan to strengthen the capacity of national non-governmental organizations to promote linguistically and culturally sensitive early learning and child care policies, programs and services for families in official language minority communities.

SOCIAL INVESTMENT: PRIORITIES AND PLANS

<i>Priority: Enhance income security and active participation in communities</i>
<i>Plans:</i> <ul style="list-style-type: none"> • Develop and implement a plan to inform people about the retirement income system and their role within it; efforts will include a focus on Aboriginals on-reserve • Develop a Seniors Council that will assist in the development of a seniors policy agenda and the Plan of Action for Seniors
<i>Priority: Break down barriers to full participation in the richness of Canadian life and communities</i>
<i>Plans:</i> <ul style="list-style-type: none"> • Undertake policy research and development on disability issue and work towards bringing forward a National Disability Act • Extend the Labour Market Agreements for Persons with Disabilities • Contribute to the Canada Pension Plan Triennial Review by managing the adoption of an amendment to relax contributory eligibility for long-term contributors applying for CPP Disability benefits, as well as other minor amendments, and planning for their eventual implementation • Start Phase I of a comprehensive evaluation of the CPP–Disability Program, including a review of existing literature and data, key informant interviews, and examination of the interactions between the CPP–D and other disability income programs • Place CPP–Disability administrative data into Statistics Canada's Research Data Centres for use by academic researchers to build the knowledge base about CPP–Disability • Improve awareness, coherence, and horizontal management of disability policies and programs within HRSDC and across the Government of Canada • Serve as a national focal point within the Government of Canada for national and international partners working to promote the full participation of people with disabilities • Support the engagement of minority language communities in new and emerging departmental policy directions
<i>Priority: Support non-profit community sector efforts to innovate, strengthen networks of collaboration, develop capacity and share good practices to contribute to community well-being</i>
<i>Plans:</i> <ul style="list-style-type: none"> • Strategically invest in national and non-profit community sector organizations through the Social Development Partnerships Program • Increase the participation of seniors through the third Call for Applications under the New Horizons for Senior Program • Foster social innovation and entrepreneurship within the non-profit community sector in a move towards greater sustainability and self-sufficiency over the long term • Additional communities will participate in the Understanding the Early Years initiative through its second Call for Proposals • Make investment to enhance early childhood development policies and programs for families in official language minority communities • Make strategic investment to support the engagement of the non-profit community sector in policy dialogue and the sharing of innovative practices • Develop tools to foster growth and innovation for community-based socio-economic development • Demonstrate leadership and support other federal departments in their efforts to effectively work with the non-profit community sector

Strategic Outcome

Enhanced income security, access to opportunities and well-being for individuals, families and communities

PROGRAM ACTIVITY: SOCIAL INVESTMENT

2006-2007 Priorities

- Enhance income security and active participation in communities
- Break down barriers to full participation in the richness of Canadian life, and communities
- Support non-profit community sector efforts to innovate, strengthen networks of collaboration, develop capacity and share good practices to contribute to community well-being

Program Activity Expected Results

- Enhanced income security and social inclusion, increased opportunities and participation of Canadians (in particular for seniors, people with disabilities and communities), through our own initiatives and through working with all of our partners

Program Indicators

- Proportion of CPP contributors who have contributory coverage/eligibility for CPP–Disability
- Number of CPP–Disability recipients who report a return to work and leave benefits – proportion of this group of clients who have remained off benefits for six months or more
- Number of partnerships concluded that provide the public with knowledge of the OAS/CPP programs
- Number of participants in programs/services under Labour Market Agreements for Persons with Disabilities
- Number and percentage of participants completing a program or service through Labour Market Agreements for Persons with Disabilities programming, where there is a specific start and end point to the intervention, by province
- Number and percentage of participants who obtained or were maintained in employment through Labour Market Agreement for Persons with Disabilities programming, where the program or service supports the activity
- Opportunities Fund for Persons with Disabilities:
 - Number of clients served
 - Number and percentage of clients who obtained employment
 - Number and percentage of clients with enhanced employability
 - Number and percentage of clients who sought further skills upgrading (returned to school)
- Social Development Partnerships Program: Knowledge is created and disseminated to meet the social development needs of citizens
- Understanding the Early Years: Number of communities which apply to the *Call For Proposals* process during each year
- New Horizons for Seniors Program: Number of seniors leading and or involved in funded project activities within the community
- Social Development Partnerships Program Office for Disability Issues: Number of proposals (from contribution agreements) funded

Programs

- Old Age Security Program
- Canada Pension Plan
- Canada Pension Plan – Disability
- Opportunities Fund for Persons with Disabilities
- Labour Market Agreements for Persons with Disabilities
- Social Development Partnership Program
- New Horizons for Seniors Program
- Understanding the Early Years

Resources

PLANNED SPENDING: : \$57,141.4 million

FTE: 767

SOCIAL INVESTMENT: PROGRAMS SUPPORTING PRIORITIES

The Social Investment program activity supports Canadians through pension and disability policies and programs, and contributes to enhancing community development through partnerships and innovation.

Old Age Security Program (OAS): OAS benefits provide basic income to Canadian citizens and residents who meet age, residence and legal status requirements. It is financed from Government of Canada general tax revenues and indexed quarterly to the Consumer Price Index. Recognizing the difficult financial circumstances faced by many seniors, OAS provides additional income-tested benefits for low-income individuals, namely the Guaranteed Income Supplement (GIS), the Allowance and the Allowance for the Survivor.

- The GIS is a monthly benefit available to OAS pensioners with little to no other income. The amount of the benefit is dependent upon marital status, residence and income.
- The Allowance is available to qualified 60 to 64 year-old spouses and common-law partners of OAS/GIS pensioners.
- The Allowance for the Survivor is available to low-income individuals aged 60 to 64 whose spouse or common-law partner is deceased and who have not re-married nor entered into a common-law relationship.

The Canada Pension Plan (CPP) is a joint federal-provincial plan that operates throughout Canada, except in Quebec, which has its own comparable plan. The CPP provides for a variety of benefits based on life changes. Best known for its retirement pensions, the CPP also provides benefits for surviving partners and children of CPP contributors, people with disabilities and their children (a description of CPP – Disability is below), and a one-time maximum benefit of \$2,500 in the event of death. It is a contributory plan; contributors are employees or self-employed persons between the ages of 18 and 70 who earn at least a minimum amount during a calendar year. Benefits are calculated based on how much and for how long a contributor has paid into the CPP. Benefits are not paid automatically—everyone must apply and provide proof of eligibility. Approximately 12 million Canadians over the age of 18 currently contribute annually to the Plan and approximately 4 million Canadians will receive benefits during 2005-2006.

The Canada Pension Plan Disability (CPP – D) benefits are payable to contributors who meet the minimum contributory requirements and whose disability is "severe and prolonged," as defined in the legislation; that is, a mental or physical disability that prevents them from working regularly at any job at a substantially gainful level. In determining an individual's medical eligibility, additional consideration is given to personal characteristics such as age, education and work experience. Socio-economic factors such as the availability of work are not. Children of CPP disability beneficiaries are also eligible for a flat rate monthly benefit up to the age of 18, or up to age 25 if attending school full-time.

The Opportunities Fund for Persons with Disabilities (OF) is designed to assist people with disabilities who are otherwise ineligible for employment programs available through the Employment Insurance program to return to work. Funding under OF assists eligible people with disabilities to prepare for and obtain employment or self-employment as well as to develop the skills necessary to maintain that new employment. OF also supports effective and innovative activities such as encouraging employers to provide individuals with work opportunities and experience; assisting individuals to increase their employment skill level and helping individuals to start their own business; and working in partnership with organizations for people with disabilities, including the private sector, to support innovative approaches to integrate individuals with disabilities into employment or self-employment, and address barriers to an individual's labour market participation.

Labour Market Agreements for Persons with Disabilities (LMAPD): The goal of the Labour Market Agreements for Persons with Disabilities is to improve the employment situation of Canadians with disabilities, by enhancing their employability, increasing the employment opportunities available to them, and building on their existing knowledge base. LMAPDs facilitate coordination in labour market programming targeted to person with disabilities through agreements with provinces.

The Social Development Partnerships Programs (SDPP) is a national, centrally managed and delivered funding program that provides grants and contributions to non-profit sector organizations that are concerned with advancing the social development and inclusion needs of people with disabilities, children and their families, and other vulnerable or excluded populations. SDPP funding helps to strengthen networks among not-for-profit organizations and enables them to expand their reach nationally, regionally and locally; to increase the availability and dissemination of information and to support knowledge sharing and the identification of best practices.

The New Horizons for Seniors Program (NHSP) supports local projects across Canada that encourage seniors to contribute to their communities through social participation and active living. The program encourages seniors to contribute their skills, experience and wisdom in support of social well-being in their communities, and promotes the ongoing involvement of seniors in their communities to reduce their risk of social isolation. NHSP funding also strengthens networks and associations among community members, community organizations, and governments; and enhance opportunities for building community capacity and partnerships to respond to existing or emerging social challenges.

The Understanding the Early Years (UEY) helps communities across Canada better understand the needs of their young children and families. UEY is a national initiative providing communities with information about the readiness to learn of their children, community factors influencing child development, and local resources available to support young children and their families. Communities can use this information to create and deliver policies, programs, or investments that help their children thrive in the early years.

PROGRAM ACTIVITY: CHILDREN AND FAMILIES

The Government of Canada has introduced a new approach to child care to give parents the flexibility to choose the option that best suits their needs. Canada's Universal Child Care Plan recognizes families as the key building block of society and gives parents the flexibility to balance work and family as they see fit.

Effective July 1, 2006, all families are eligible to receive \$1,200 per year for each child under six, to be taxable in the hands of the lower-income spouse. New measures will also be introduced to encourage initiative by employers, non-profit and community organizations to create child care spaces. By allocating up to \$250 million per year, these new measures aim to create 25,000 new child care spaces per year and will be designed to ensure access by families in cities and rural communities, and by those parents with non-standard work hours.

HRSDC will continue to support children and families through the National Child Benefit, which helps to ensure children in low-income families are supported in achieving their full potential. Also, as noted earlier, HRSDC will provide policy advice on the development of a complementary Aboriginal strategy on early learning and childcare, in partnership with other departments, including Indian and Northern Affairs and Health Canada.

HRSDC is responsible for policy development with respect to the National Child Benefit, and the Minister of Human Resources and Social Development represents the Government of Canada in this federal/provincial/territorial initiative.

Strategic outcome indicators

INDICATORS	CURRENT LEVEL												
Percentage of children 4-5 years of age displaying normal to advanced development	2002-2003 86.9% of children 4 to 5 years of age displayed average to advanced levels of verbal development.												
Distribution of children 0-6 by type of primary care arrangement	2002-2003 <table> <tr> <td><u>Parental Care</u></td><td>47%</td></tr> <tr> <td><u>Non-Parental Care</u></td><td>53%</td></tr> <tr> <td>Care in someone else's home</td><td>45.9%</td></tr> <tr> <td>Care in child's home</td><td>21.6%</td></tr> <tr> <td>Daycare centre</td><td>27.8%</td></tr> <tr> <td>Other</td><td>4.7%</td></tr> </table>	<u>Parental Care</u>	47%	<u>Non-Parental Care</u>	53%	Care in someone else's home	45.9%	Care in child's home	21.6%	Daycare centre	27.8%	Other	4.7%
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Care in child's home	21.6%												
Daycare centre	27.8%												
Other	4.7%												
Percentage of children for whom there is a regulated child care space (broken down by children ages 0-5 and 6-12)	2004 Approximately: <table> <tr> <td>Children 0-12</td><td>15.5%</td></tr> <tr> <td>Children under age 6</td><td>24%</td></tr> <tr> <td>School age children 6-12</td><td>9.3%</td></tr> </table>	Children 0-12	15.5%	Children under age 6	24%	School age children 6-12	9.3%						
Children 0-12	15.5%												
Children under age 6	24%												
School age children 6-12	9.3%												
Percentage of children ages 0-5 displaying behaviour problems	2002-2003 Emotional problems-anxiety: 16.7% of children 2 to 5 years of age displayed signs associated with emotional problems-anxiety Hyperactivity/Inattention: 5.5% of children 2 to 5 years of age displayed behaviour associated with hyperactivity or inattention Aggression/Conduct Problems 14.6% of children 2 to 5 years of age displayed signs of aggression or conduct problems Age-appropriate personal and social behaviour: 15.7% of children from birth to 3 years of age did not display age-appropriate personal and social behaviour												
Percentage of children living in families exhibiting positive family functioning	2002-2003 90.2% of children from birth to 5 years of age lived in well-functioning families												

CHILDREN AND FAMILIES: PRIORITIES AND PLANS

Priority: Provide support and choices for families, through Canada's new Universal Child Care Plan and other existing initiatives, to help ensure their children have the best possible start in life

Plans:

- Ensure successful implementation of Canada's Universal Child Care Plan through:
 - Working with other government departments to implement the Universal Child Care Benefit effective July 2006
 - Developing a strategy for the creation of new child care spaces, in consultation with other government departments, provinces and territories, stakeholders and Canadians
- Ongoing implementation of the Federal/Provincial/Territorial Early Childhood Development Agreement and the Multilateral Framework on Early Learning and Child Care

Strategic Outcome

Enhanced income security, access to opportunities and well-being for individuals, families and communities

PROGRAM ACTIVITY: CHILDREN AND FAMILIES

2006-2007 Priorities

- Provide support and choice for families, through Canada's new Universal Child Care Plan and other existing initiatives, to help ensure their children have the best possible start in life

Program Expected Results

- Support low income families with children
- Provide families with a choice in child care

Program Indicators

- Incidence of low income – the change in the number and percentage of families and children that fall below the post-tax low income cut-off (LICO), due to the National Child Benefit, in one year
- Depth of low income – the change in the aggregate amount of income that low-income families would need to reach the post-tax LICOs, due to the National Child Benefit, in one year
- Number of children under six years of age for whom their parents are receiving the Universal Child Care Benefit

Programs

- Universal Childcare Benefit
- Child Care Spaces Initiative
- Multilateral Framework for Early Learning and Child Care
- Early Childhood Development Agreement
- National Child Benefit

Resources

PLANNED SPENDING: : \$2,282.8 million

FTE: 105

CHILDREN AND FAMILIES: PROGRAMS SUPPORTING PRIORITIES

The Children and Families program activity supports work that ensures all children have the best possible start in life and that enhances the support and choices for families.

Canada's Universal Child Care Plan:

The Government of Canada has introduced Canada's Universal Child Care Plan consisting of two key elements designed to give parents choice in child care so they can balance work and family life.

- *Universal Child Care Benefit:* Effective July 2006 all families are eligible to receive up to \$1,200 per year for each child under six, to be taxable in the hands of the lower-income spouse. Payments are made directly to parents so that they can choose the child care that is best for their children and their family's needs. The Universal Child Care Benefit is provided in addition to existing federal programs such as the Canada Child Tax Benefit, the National Child Benefit Supplement and the Child Care Expense Deduction and will not affect the benefits families receive under these programs. Further information can be found at www.universalchildcare.ca.
- *Child Care Spaces Initiative:* In the May 2, 2006 Federal Budget, the Government of Canada committed to investing \$250 million per year, beginning in 2007-2008, to support the creation of new child care spaces, in cooperation with provinces and territories, employers and community non-profit organizations. The goal is to create up to 25,000 additional spaces each year for families that are flexible, responding to a variety of needs such as shift work, seasonal labour, and families living in rural communities. Work on the development of this initiative will proceed through 2006, including consultations.

Multilateral Framework on Early Learning and Child Care: Building on the September 2000 Early Childhood Development Agreement, federal/provincial/territorial Ministers Responsible for Social Services¹⁹ reached agreement in March 2003, on a framework for improving access to affordable, quality, provincially and territorially regulated early learning and child care programs and services. The specific objectives of the Multilateral Framework on Early Learning and Child Care are to further promote early childhood development and support the participation of parents in employment or training by improving access to affordable, quality early learning and child care programs and services.

In support of these objectives, the Government of Canada is providing \$1.05 billion over five years through the CST to support provincial and territorial government investments in early learning and child care. Early learning and child care programs and services funded through this initiative will primarily provide direct care and early learning for children in settings such as child care centres, family child care homes, preschools, and nursery schools. Investments can include capital and operating funding, fee subsidies, wage enhancements, training, professional development and support, quality assurance, and parent information and referral. Governments report annually on their activities and expenditures related to this agreement. Further information can be found at <http://www.ecd-elcc.ca>

¹⁹ While the Government of Quebec supports the general principles of the Early Learning and Child Care initiative, it did not participate in developing these initiatives because it intends to preserve sole responsibility for social matters. However, Quebec receives its share of federal funding and the Government of Quebec is making major investments toward programs and services for families and children.

Early Childhood Development Agreement: In September 2000, the Government of Canada and provincial and territorial governments reached an agreement, the Federal/Provincial/Territorial Early Childhood Development (ECD) Agreement, to improve and expand the services and programs they provide for children under 6 years of age and their families.²⁰ The overall goal of the initiative is to improve and expand early childhood development supports for young children (prenatal to age 6) and their parents. The specific objectives are:

- to promote early childhood development so that, to their fullest potential, children will be physically and emotionally healthy, safe and secure, ready to learn and socially engaged and responsible
- to help children reach their potential and to help families support their children within strong communities

In support of these objectives, the Government of Canada is transferring \$500 million per year, via the Canada Social Transfer, to provincial and territorial governments to improve and expand programs and services in four key areas: promoting healthy pregnancy, birth and infancy; improving parenting and family supports; strengthening early childhood development, learning and care; and strengthening community supports. To track progress, governments report annually on their activities and expenditures and biennially on a common set of indicators of young children's well-being. Further information on the initiative can be found at <http://www.ecd-elcc.ca>

National Child Benefit – Introduced in 1998 as a supplement to the Canada Child Tax Benefit,²¹ the National Child Benefit initiative is a key commitment in helping to ensure that children in low-income families are supported in achieving their full potential is the National Child Benefit initiative. The National Child Benefit is a partnership among federal, provincial, and territorial governments²², including a First Nations component, which provides income support, as well as benefits and services, to low-income families with children. The National Child Benefit aims to: help prevent and reduce the depth of child poverty; promote attachment to the labour market by ensuring families are always better off as a result of working; and reduce overlap and duplication by harmonizing program objectives and benefits and simplifying administration. Under this initiative, the Government of Canada provides income support to low-income families with children through the NCB Supplement. Human Resources and Social Development Canada is responsible for policy development with respect to the National Child Benefit, and the Minister of Human Resources and Social Development represents the Government of Canada in this federal/provincial/territorial initiative. The implementation of the National Child Benefit and how effective it has been at meeting its objectives is monitored through annual progress reports and joint federal-provincial-territorial evaluations. These reports are available on the National Child Benefit website: <http://www.nationalchildbenefit.ca/>

²⁰ While the Government of Quebec supports the general principles of the *Early Childhood Development Agreement*, it did not participate in developing this initiative because it intends to preserve sole responsibility for social matters. However, Quebec receives its share of federal funding and the Government of Quebec is making major investments in programs and services for families and children.

²¹ The Canada Child Tax Benefit is administered by the Canada Revenue Agency, which reports on its strategic priorities, indicators and outcomes.

²² The Government of Quebec has stated that it agrees with the basic principles of the National Child Benefit. Quebec chose not to participate in the initiative because it wanted to assume control over income support for children in Quebec; however, it has adopted a similar approach to the National Child Benefit. Throughout this section, references to joint F/P/T positions do not include Quebec.

**SOCIAL INVESTMENT, AND CHILDREN AND FAMILIES: FINANCIAL RESOURCES –
PLANNED SPENDING²³**

Financial and Human Resources			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
<i>Financial Resources (in millions of dollars)</i>			
Gross Operating Expenditures	160.3	150.1	149.7
Non-Statutory Grants and Contributions	296.6	303.3	306.5
Statutory Grants and Contributions:			
Old Age Security	23,255.0	24,139.0	25,285.0
Guaranteed Income Supplement	6,820.0	7,219.0	7,512.0
Allowances	500.0	537.0	568.0
Universal Child Care Benefit	1,610.0	2,085.0	2,065.0
Child Care - Prov./Terr. Agreements	650.0	-	-
New Child Care Spaces	-	250.0	250.0
Total Statutory Grants and Contributions:	32,835.0	34,230.0	35,680.0
Sub-Total	33,291.9	34,683.4	36,136.2
CPP Benefits	26,132.3	27,496.9	28,917.7
Total	59,424.2	62,180.3	65,053.9
<i>Human Resources</i>			
Full Time Equivalents	872	884	884

²³ Planned Spending Tables for Social Investment and Children and Families are presented together, in accordance with the 2006-2007 Main Estimates.

Details by Programs and Services			
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Social Investment			
Seniors and Pensions	53,248.3	55,779.3	58,514.7
Disability Programs	274.0	269.0	268.9
Canada Pension Plan - Disability	3,523.3	3,674.0	3,829.0
Community Development and Partnerships	52.6	59.5	62.4
Allocated Corporate Services ^a	43.2	40.4	40.7
Sub-Total	57,141.4	59,822.2	62,715.7
Children and Families			
Child Care	1,610.0	2,085.0	2,065.0
Multilateral Framework for Early Learning and Child Care	650.0	250.0	250.0
Early Childhood Development Agreements	3.5	3.5	3.5
National Child Benefit	2.4	2.4	2.4
Allocated Corporate Services ^a	5.4	5.7	5.8
Other	11.5	11.5	11.5
Sub-Total	2,282.8	2,358.1	2,338.2
Total	59,424.2	62,180.3	65,053.9
Human Resources			
Full Time Equivalents	872	884	884

^a Corporate Services resources related to the Minister's Office, the Deputy Minister's Office, the Comptroller's Office and the Shared Services have been prorated to each Strategic Outcome.

Social Investment Program Activity – Modifications from the 2005-2006 Program Activity Architecture:

- The former program activity Social Investment has been split into two program activities: Social Investment, and Children and Families.
- The former sub-activity Seniors has been changed to Seniors and Pensions.
- The former program sub-activity Persons with Disabilities has been changed to Disability Programs.
- CPP - Disability has been moved to a sub-activity and includes Disability Benefits and Appeals.
- The sub-activity Community-based Grants and Contributions has been changed to Community Development and Partnerships.
- The former sub-activity Appeals has been moved under Canada Pension Plan – Disability.

Children and Families Program Activity – Modifications from the 2005-2006 Program Activity Architecture:

- A new sub-activity for Child Care has been added. The sub-activity includes two key governmental priorities: the Universal Child Care Benefit and the Child Care Spaces Initiative.
- The Multilateral Framework for Early Learning and Childcare was moved to a sub-activity.
- The Early Childhood Development Agreement was moved to a sub-activity.
- The National Child Benefit was moved to a sub-activity.
- Former activities CPP Benefits for Children with Disability Beneficiaries, CPP Orphans, and CPP Survivor have been subsumed under the activity Canada Pension Plan – Disability.

PROGRAM ACTIVITY: HOUSING AND HOMELESSNESS

In December 1999, the federal government launched the three-year National Homelessness Initiative (NHI)²⁴ to deal with a growing national crisis of homeless people on the streets of Canada. In 2003, the NHI was renewed for another three years to provide communities with the tools to plan and implement local strategies to help reduce homelessness. In November 2005, the government announced a one-year extension (2006-2007) of the NHI, with funding in the amount of \$134.8 million, to sustain vital, healthy communities through investments in successful housing and homelessness initiatives. The NHI extension will ensure that essential shelters and related support services for homeless people are maintained in urban and rural communities across Canada.

The NHI makes strategic investments in 61 designated communities as well as in small, rural and Aboriginal communities across Canada to build a continuum of supports and services that helps homeless and at-risk people in those communities to move towards self-sufficiency. The Housing and Homelessness Branch (formerly the National Secretariat on Homelessness) and the communities collaborate in broadening and increasing partnerships – with a focus on the corporate sector, unions and foundations to ensure the long-term sustainability of community efforts. All of this work has led to increased community capacity in the areas of planning, decision-making, networking and information-sharing to find local solutions to address homelessness.

The NHI continues its work to overcome a national situation in which more than 150,000 Canadians use homeless shelters every year. In addition, countless others are on the streets or are the “hidden homeless” – people living with friends and family, or sleeping in cars, away from the public eye and outside of the shelter system. As well, over half a million Canadians spend more than 50% of their income on housing, putting them at high risk of becoming homeless. The diverse sub-population of homeless Canadians includes those with mental health and/or addiction problems, lone-parent families headed by women, youth, victims of family violence, refugees and recent immigrants, ex-offenders, the working poor, and Aboriginal people. Across Canada, especially in major urban centres, Aboriginal people are significantly over-represented in the homeless population.

Strategic outcome indicators

INDICATORS	CURRENT LEVEL
Percentage of overall SCPI funding, for projects completed in 2005-2006, between:	
(a) emergency shelters	35%
(b) transitional housing and supportive housing	65%
Number of National Homelessness Initiative funding partners in 2005-2006.	385*
Percentage of National Homelessness Initiative funding partners by Sectors for 2005-2006.	Non-profit 34%
	Sponsor/Organization/ Recipient (internal fundraising) 20%
	All orders of Government (e.g. federal/agencies, provincial/territorial, regional/municipal) 24%
	Private Sector 10%
	Others (such as faith-based communities unions, etc.) 12%

* In previous years, a cumulative total was reported.

²⁴ The National Homelessness Initiative is an important horizontal initiative, which is managed by HRSDC, and which involves various partners, including organizations from other orders of government. Details on this horizontal initiative can be found at: http://www.tbs-sct.gc.ca/rma/epi-ibdrp/hrdb-rhbd/profil_e.asp

The NHI is making a concerted effort to improve horizontality by working with other federal departments to achieve shared outcomes, recognizing that the key is finding the appropriate accountability and delivery instruments. In the area of health, the NHI is involved with the Canadian Institute on Health Research (CIHR), through funding of various projects and is extensively involved with the Reducing Disparities Initiative at CIHR. The Department signed a Memorandum of Understanding with the Public Health Agency of Canada's Strategic Projects Branch to jointly fund the "train the trainer" program on Fetal Alcohol Spectrum Disorder.

Canada Mortgage and Housing Corporation (CMHC) is now part of the portfolio of the Minister of HRSD. Work has been undertaken to ensure greater complementarity of the NHI's programs, the Affordable Housing Initiative and the Residential Rehabilitation Assistance Program. The Department is renewing its agreement with CMHC on general research issues and data sharing and data integration. Other collaborative initiatives include the HRSDC-led Action for Neighbourhood Change project, where agreements have been signed with other federal departments including Health Canada, Public Safety and Emergency Preparedness Canada.

HOUSING AND HOMELESSNESS: PRIORITIES AND PLANS

<i>Priority:</i> Contribute to the reduction of homelessness in Canada
<i>Plans:</i> <ul style="list-style-type: none"> Review and disseminate program funding allocation, guidelines and tools to ensure a smooth transition and efficient delivery of the National Homelessness Initiative during the extension year (2006-2007) Produce and disseminate National Homelessness Initiative results for the period of 2003-2007
<i>Priority:</i> Develop homelessness and housing policies for Canadians, including Aboriginal peoples
<i>Plans:</i> <ul style="list-style-type: none"> Develop policy options for the National Homelessness Initiative beyond March 2007
<i>Priority:</i> Strengthen horizontal links between housing and homelessness and other policy areas
<i>Plans:</i> <ul style="list-style-type: none"> Improve coordination and reporting of horizontal links with federal partners.

Strategic Outcome

Enhanced income security, access to opportunities and well-being for individuals, families and communities

PROGRAM ACTIVITY: HOUSING AND HOMELESSNESS

2006-2007 Priorities

- Contribute to the reduction of homelessness in Canada
- Develop homelessness and housing policies for Canadians, including Aboriginal peoples
- Strengthen horizontal links between housing and homelessness and other policy areas

Program Expected Results

- Contribution to the reduction of homelessness

Program Indicators

- Percentage of investments directed toward the continuum of supports and services based on priorities established by the community
- Ratio of total National Homelessness Initiative investments versus funding by type of partners for each province and territory 2003-2007
- Increase in accessible sources of information/data on homelessness

Programs

- Supporting Communities Partnership Initiative
- Urban Aboriginal Homelessness
- Regional Homelessness Fund
- National Research Program
- Homeless Individuals and Families Information System
- Surplus Federal Real Property for Homelessness Initiative

Resources

PLANNED SPENDING: \$188.1 million

FTE: 383

HOUSING AND HOMELESSNESS: PROGRAMS SUPPORTING PRIORITIES

The Housing and Homelessness program activity assists communities, through partnerships, in implementing measures – such as shelters, supportive and transitional housing, and related support services – that help homeless individuals and families as well as those at risk of homelessness move toward self-sufficiency, thereby contributing to society and the economy.

http://www.homelessness.gc.ca/home/index_e.asp

Supporting Communities Partnership Initiative (SCPI) increases the availability of and access to a range of services and facilities (emergency shelters, transitional/supportive housing, and prevention) along the continuum from homelessness to self-sufficiency and an independent lifestyle. Projects funded by the SCPI support the priority areas identified through an inclusive community planning process. Along with providing financial support to communities, the SCPI encourages them to work in partnership with provincial/territorial and municipal governments as well as the private and voluntary sectors to strengthen existing capacity and to develop integrated responses to homelessness. Communities are allocated a maximum funding level that must be matched from other community sources (i.e. fundraising, local sponsors, etc.). Communities must also explain how their activities are sustainable (i.e. how they will continue once SCPI funding ends). http://www.homelessness.gc.ca/initiative/scpi_e.asp

Urban Aboriginal Homelessness (UAH): Aboriginal homelessness is a serious issue in some communities and is best addressed by developing local responses. The NHI will continue to address the unique needs of the Aboriginal population through its UAH component. This component provides flexibility to meet the needs of off-reserve homeless Aboriginal people, through culturally sensitive services. Enhancing capacity building – both within and outside of Aboriginal communities – through community planning, decision making and the formulation of partnerships is a key UAH focus. Cost matching is not required; however, community contributions will be encouraged where and when possible. The Housing and Homelessness Branch works with the Federal Interlocutor Division of Indian and Northern Affairs Canada to ensure the complementarity of the Urban Aboriginal Strategy pilot projects and the NHI's UAH component. http://www.homelessness.gc.ca/initiative/uah_e.asp

Homeless Individuals and Families Information System (HIFIS): There is little credible information nor reliable methodology to determine the exact number of homeless people in Canada, the extent of homelessness-related supports and services provided by shelters, and the diversity of these shelters' clientele. To better address these knowledge gaps, HIFIS gives service providers an electronic data management system that enables them to share information and develop partnerships at the local, private, municipal, provincial/territorial and federal levels. It assists communities in longer-term planning efforts and capacity building to address their local homelessness challenges. The benefits resulting from a network of data-sharing communities will contribute to the development of a national database. This database will provide a better understanding of the size and scope of the shelter homeless population, guide policy development, and help in further transforming management practices within the shelter system. http://www.homelessness.gc.ca/initiative/hifis_e.asp

The National Research Program (NRP) addresses the gaps and priorities in knowledge about homelessness in Canada. The program works to: further increase the base of policy and community-relevant research; encourage and support research partnerships (with research and community organizations, other federal departments, and academic researchers); and facilitate the sharing of best practices and transfer of knowledge. By providing funding to partners to strengthen their capacity to develop a deeper understanding of homelessness, the NRP helps foster the development and assessment of appropriate and effective solutions to homelessness at the local and national levels. This is vital to making efficient use of scarce resources and sustaining community efforts over the long term. http://www.homelessness.gc.ca/initiative/nrp_e.asp

The Regional Homelessness Fund (RHF) provides support to small and rural communities that are experiencing local homelessness, but often lack capacity to respond. Homeless individuals or those at risk of homelessness must often move to larger urban centres to obtain homelessness-related supports and services. This in turn can place a burden on the service systems of these larger communities. The RHF provides funding to establish support services needed to prevent homelessness and to help stabilize the living conditions of at-risk individuals and families. The fund also encourages a wide range of partnerships and takes the unique needs of youth populations into consideration in the planning and implementation process. http://www.homelessness.gc.ca/initiative/rhf_e.asp

Surplus Federal Real Property for Homelessness Initiative (SFRPHI) provides surplus federal properties to communities across Canada to address their local homelessness-related needs through Housing and Homelessness Branch (HHB) coordination. The homelessness projects, which must be financially viable and sustainable, help communities overcome the high capital costs of buying land or buildings. Government departments and agencies, which are encouraged to identify such properties, receive compensation at market value and transfer them – to community organizations, the not-for-profit sector and other orders of government – for a nominal cost to help alleviate and prevent homelessness. Additional funding for construction and renovation costs may also be available through related federal programs such as SCPI and Canada Mortgage and Housing Corporation (CHMC) programs. Three Government of Canada organizations – Public Works and Government Services Canada, Human Resources and Social Development and CMHC – act as partners at the national and regional levels in implementing and managing this initiative. http://www.homelessness.gc.ca/initiative/sfrphi_e.asp

HOUSING AND HOMELESSNESS: FINANCIAL AND HUMAN RESOURCES – PLANNED SPENDING

Financial and Human Resources			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Gross Operating Expenditures	40.2	3.3	3.3
Non-Statutory Grants and Contributions	147.9	0.0	0.0
Total	188.1	3.3	3.3
Human Resources			
Full Time Equivalents	383	12	12

Details by Programs and Services			
	2006-2007	2007-2008	2008-2009
Financial Resources (in millions of dollars)			
Supporting Communities Partnership Initiative	133.0	2.2	2.2
Urban Aboriginal Homelessness	18.2	-	-
Regional Homelessness Fund	5.4	-	-
National Research Program	2.8	-	-
Homeless Individuals and Families Information System	2.1	-	-
Surplus Federal Real Property for Homelessness Initiative	2.5	-	-
Allocated Corporate Services ^a	13.1	1.1	1.1
Other ^b	11.0	-	-
Total^c	188.1	3.3	3.3
Human Resources			
Full Time Equivalents ^a	383	12	12
<p>^a Corporate Services resources related to the Minister's Office, the Deputy Minister's Office, the Comptroller's Office and the Shared Services have been prorated to each Strategic Outcome. In 2006-07, 101 FTEs are included in the 383 FTEs.</p> <p>^b This amount includes \$11.0 million for the World Urban Forum - Vancouver 2006.</p> <p>^c This amount includes \$22.8 million (291 FTEs) in 2006-2007, \$1.5 million (7 FTEs) in 2007-2008 and \$1.5 million (7 FTEs) in 2008-2009, for the delivery of programs and services by Service Canada. For a full accounting of Service Canada's operations please refer to the Strategic Outcome, "Achieve better outcomes for Canadians through service excellence".</p>			

Housing and Homelessness Activity - Modifications from the 2005-2006 Program Activity Architecture: with the exception of the program activity name change from Homelessness to Housing and Homelessness, there are no changes from 2005-2006 activity structure.

WORLD URBAN FORUM

Canada offered to the United Nations to host the third session of the World Urban Forum in Vancouver from June 19 to 23, 2006. The event is held biannually by UN-Habitat in coordination with a host country. The purpose of the World Urban Forum (WUF) is to discuss issues and find solutions to challenges created by the rapid urbanization occurring in the world today. The event brings together a wide range of participants, including national and local governments, non-governmental organizations, private sector businesses, community-based organizations and experts.

The Department was given the responsibility to organize the event and coordinate Canadian presence at the event, working with other federal departments/agencies, other levels of government and other stakeholders. A key aspect of the Department's responsibilities was to work closely with UN-Habitat to ensure a smooth and well-run event.

Planned Spending – WUF3:

The Government of Canada committed \$27.6 million over two years (2005-2006 and 2006-2007) for the organization and management of this conference – \$15 million (\$11 million in 2006-2007) of which was new funding coming from HRSDC. The remaining funds came from the existing budgets of various federal departments/agencies.

Results and Outcomes:

Over 10,000 people attended the World Urban Forum in Vancouver, while the expectation was for 6,000. Participants came from 160 countries, including 63 delegations led by ministers. More than 400 mayors attended. Prime Minister Harper gave the keynote address at the opening ceremonies. Media coverage was considerable, both domestically and globally. Comments from participants, early evaluation results and UN-Habitat's own analysis all suggest that the event was a huge success, both in terms of logistics/program and in achieving the goals established for the event. In sum, the Forum met the UN's, Canada's and the federal government's objectives. These included the UN's interest in ensuring it was well-attended and productive, building momentum for the WUF process and a focus on actionable ideas; Canada's interest in showcasing its urban practices and ensuring participants felt positively about the Forum; and the federal government's interest in both these objectives plus ensuring an effective, accurate and coordinated communication of the government's contributions to urban (cities, communities) issues.

Key Partners:

There were two key partners: UN-Habitat and the GLOBE foundation. UN-HABITAT is a UN agency based in Nairobi. It is responsible for organizing WUF every two years, working with a host country and raising funds internationally, particularly from the host country, to finance the event. The GLOBE Foundation is a non-profit organization, which signed a contribution agreement with the Government of Canada to manage the logistics of the World Urban Forum. This included logistics for an experimental, on-line preparatory event, HabitatJAM, which engaged close to 35,000 people from across the world over a three day period in December 2005.

Strategic Outcome



ACHIEVE BETTER OUTCOMES FOR CANADIANS THROUGH SERVICE EXCELLENCE

SERVICE CANADA

Service matters to Canadians. Citizens expect and deserve timeliness, fairness, knowledge, competence, courteousness and results when dealing with the Government of Canada. Within a complex operating environment, the Government of Canada is committed to providing the highest level of citizen-centred quality services that meet the needs and exceed the expectations of Canadians.

As part of the government's efforts to respond to these requirements, Service Canada was officially launched on September 14, 2005, initiating a new approach to serving Canadians. As a dedicated service delivery organization, Service Canada puts people at the centre of its mandate, making it easier for Canadians to obtain the help they need in one place. A strengthened focus on programs and services will improve policy outcomes by better connecting citizens and communities to the services and benefits they need. Service Canada marks the continuation of a cultural transformation in the public service, where the citizen is at the centre of everything it does and service matters. Service Canada will improve service across delivery channels, increase flexibility and capacity for the introduction of new programs and services, and enhance coordination and rationalization of investments in service delivery infrastructure.

Service Canada, in collaboration with federal departments and other governments, is mandated to deliver a full range of integrated programs and services to Canadians, further streamlining how government services are provided. Service Canada provides a one-stop, easy-to-access, personalized experience of services across multiple channels including phone, Internet, in-person and mail. Service Canada has over 20,000 employees dedicated to serving Canadians, 433 points of service throughout the country, the national 1 800 O-Canada phone service, a range of on-line services offered on the Internet through servicecanada.gc.ca, and outreach services.

Quick Facts – Each year Service Canada:

- Serves over 32 million Canadians
- Pays over \$70 billion (\$180m a day) in benefits to Canadians
- Conducts 350 million transactions a year with Citizens
- Handles over 55 million calls
- Mails over 20 million letters
- Handles over 4.8 million transactions on-line
- Interacts with over 55,000 community organizations

The federal government has recently experienced a period of profound transition and change and faces an array of challenges and opportunities to enhance performance, ensure accountability and transparency, and position the government for the demands of the future. Accountability and transparency are important factors in securing good governance, as well as in restoring and strengthening citizens' trust and confidence in government's ability to meet their needs. The creation of Service Canada is a major step towards the government's transformation effort and will fundamentally change the service culture to become more results-oriented, citizen-focused, and be collaborative in nature. Service Canada's commitment to service excellence goes beyond a new structure for service delivery; it's about tangible and visible service improvements that demonstrate seamless citizen-centred services and instigate a culture of accountability and transparency. This will result in improved citizen satisfaction with government programs and services.

To demonstrate this commitment to accountable and responsive government, a Service Charter has been published that explains what Canadians can expect and how they can provide feedback. Service Canada will continually monitor and report on progress against it. An independent Office for Client Satisfaction has been established to receive the views of Canadians on the quality of service and recommend improvements. This fall, Service Canada will be publishing service standards, which will clearly set out the level of service that Service Canada is committed to providing, consistent with the objectives laid out in the Service Charter. To demonstrate accountability and transparency, Service Canada will report on its success in meeting the service standards in a Service Canada Performance Scorecard. The Scorecard will appear in the Service Canada Annual Report to Parliament and Canadians. To support this new level of transparency and accountability for service, control systems are in place to reinforce good stewardship practices and management and accountability structures throughout Service Canada.

For 2006-2007, Service Canada will focus on improving service to Canadians, strengthening transparency and accountability and recognising and rewarding service excellence. This focus is reflected directly in our program activities of: Seamless Citizen-Centred Service; Integrity; and Collaborative, Networked Government Service.

PROGRAM ACTIVITY: SEAMLESS, CITIZEN-CENTRED SERVICE

In the past, Canadians have had to determine how to access service across a myriad of unconnected program and departmental service silos. Citizen-centred service is about changing how government serves Canadians, putting the citizen at the centre of how government does business and providing the quality of service that Canadians need and expect. A citizen focus means providing one-stop, integrated, easy-to-access, and personalized service by phone, Internet, in person and by mail. Ultimately, it will enable better policy outcomes for Canadians.

This activity will enable a move from departmental and program silos to a new citizen focus, from reducing our federal presence to expanding our regional community points of service, and from a prior focus on benefits delivery to becoming the Government of Canada face to Canadians.

Over the next three years, Service Canada will be implementing five key plans to transform service to Canadians:

- Implement a client community service strategy, including identifying client segment champions, improving and developing new service offerings and building the capacity to understand, research and analyze client needs. Service Canada will create client community advisory groups to inform, assess and participate in developing more meaningful and responsive services to our client communities. This initiative will result in a better understanding of the needs of client communities and in the development of service strategies for serving client communities effectively.
- Undertake business and product development to transition from a reliance on processes and approaches that are founded in programs and program development to ones founded on service offerings, based upon Canadians' needs.

- Expand the regional and community service network and offer choice and access where Canadians live by doubling the points of service, developing a new in person service experience model, and implementing a consistent brand across the network. This improvement will reaffirm Service Canada as the Government of Canada network of choice.
- Enhance the telephone channel as a key channel of choice for Canadians by implementing a world class Service Canada integrated call centre network that provides telephone based services to Canadians through a single number. This positions Service Canada's telephone service for the future as it moves to provide enhanced citizen-centred services and to offer telephone services for other organizations and partners.
- Renew Internet and Intranet services to enhance citizen access to programs and services. The Internet channel provides the backbone of information on programs and services and electronic services to Canadians. By moving to a world class, fully integrated and service oriented website, Canadians will be able to interact more quickly, easily and efficiently with government.

Service matters to Canadians. Research shows there is a strong link between efficient service and confidence in Government, as this is the primary way that citizens come into contact with their governments, personally and directly. Concurrently, Service Canada will also focus on achieving and rewarding a service excellence culture. Service Canada will be:

- Build service excellence by creating a new government career for service delivery. By creating a career associated with service, Service Canada is allowing its employees to progress through innovation in citizen centred service
- Achieve service excellence by launching the first phase of the Service Canada College, the opening of the Galleria learning centre in Regina. This is the starting point for new investments in enhancing employee skills and capabilities, focused around serving Canadians
- Reward service excellence by establishing a leadership development program, building leadership capacities, and launching the Office of Employee Innovation

Finally, Service Canada has made commitments to Canadians and to Parliamentarians. As part of Service Canada's priority to strengthen accountability and transparency, it will be reporting on progress through the Service Charter, the Service Standards and Performance Scorecard, and through the establishment of the Office for Client Satisfaction.

SEAMLESS, CITIZEN-CENTRED SERVICE: PRIORITIES AND PLANS

Priority: Transforming service to Canadians

Plans:

- Implementing our Service Strategies for Client Communities
- Undertaking business and product development
- Expanding our regional and community presence
- Integrating call centres
- Renewing Internet and Intranet services

Priority: Achieving and rewarding a service excellence culture**Plans:**

- Building for service excellence
- Achieving service excellence
- Rewarding service excellence

Priority: Strengthening accountability and transparency**Plans:**

- Reporting on our commitments to Canadians and Parliamentarians

PROGRAM ACTIVITY: INTEGRITY

Service Canada issues \$70 billion in benefits to Canadians each year and must ensure that these benefits are going to the right people, in the right amount and for the purpose for which they were intended. Fundamental to Service Canada's accountability is the integrity of the organization and the demonstration of sound stewardship as the Canadian Government's service delivery arm. Service Canada must demonstrate its understanding of the risks to its success and manage those risks effectively. Further, the monitoring and measurements of our achievements will be based on sound methodologies and dependable data. Establishing a robust and rigorous integrity strategy is fundamental to delivering citizen-centered service, improving public trust and confidence in government, and achieving savings for taxpayers.

Over the next three years, Service Canada will focus on various initiatives to strengthen accountability and transparency:

- Establish enterprise-wide integrity by ensuring that the benefits Service Canada delivers each year are going to the right person, in the right amount and for the correct purpose. To accomplish this Service Canada needs to know that its risk management strategies are effective, that the quality of its work is meeting high standards, and that the information used to manage the identity of its clients and report on its achievements is reliable. This will involve strengthening the Social Insurance Number (SIN) processes, the Social Insurance Registry (SIR) and authentication models as the basis to access programs and services. In addition, Service Canada will focus on expanding its risk analysis capacity and implementing an enterprise-wide quality framework to respectively improve and measure its compliance and accuracy in benefit delivery.
- Maximize savings through efficient and cost-effective delivery of service offerings and the control and detection of inaccurate or wrongful payments as per Service Canada's savings commitments, supported by necessary mechanisms to realize, monitor and report on progress. While Service Canada has achieved its year one savings target, it is critical that the organization stays on track and meets its year two and beyond commitments in order to enhance its credibility with Canadians and demonstrate sound stewardship and accountability.

INTEGRITY: PRIORITY AND PLANS**Priority: Strengthening accountability and transparency****Plans:**

- Establishing enterprise integrity
- Meeting our saving commitments

PROGRAM ACTIVITY: COLLABORATIVE, NETWORKED GOVERNMENT SERVICE

Service Canada is the largest government service delivery organization in Canada. It has the largest presence across the country, runs the 1 800 O-Canada government phone service as well as handles 80% of the Government of Canada non-tax related phone calls and it manage the Canada.gc.ca internet site. Service Canada is ideally positioned to be the Government of Canada network of choice, but recognise that there are other service delivery networks. Service Canada will form the Government of Canada network of choice by creating a collaborative, networked government service to align all these networks, with Service Canada at the core. To do this it has to make access to the network easy, extend the network through new partnerships and invest in service delivery channels to put the citizen at the centre.

In the next year, Service Canada will develop plans to make access to the collaborative network easier for governments. Service Canada's network is a significant asset that can be leveraged to deliver key services to Canadians where they live. Building on its existing service delivery network and its capacity to disseminate information across the country, Service Canada will develop a new emergency preparedness offering to provide assistance and support in response to local or national emergencies and crises. For this service offering Service Canada will partner with other federal departments such as Public Safety and Emergency Preparedness Canada.

Service Canada plans to extend the network through new and expanded partnerships: It will continue to create value for Federal Departments and plans to sign and implement three new agreements. Furthermore, Service Canada is expanding its collaboration in the delivery of services with provinces. Already it has collaboration in New Brunswick and Ontario and expects to extend this with three new agreements to build a network of service delivery collaboration across the country.

Service Canada has three plans to invest in service delivery channels to achieve client information integration and put the citizen at the centre of a world class collaborative network:

- Establish a 'one client view' to support service delivery. Providing service to Canadians requires the ability to view information from a citizen-centred perspective. The one client view will transform the way Service Canada approaches service to remove program silos and to enable Service Canada to become experts in the collection, use and integration of information to meet the needs of Canadians. This will mean that information will only needed to be collected once, privacy will be enhanced, all while giving Canadians the opportunity to easily find programs and services in one place. Service to Canadians will be transformed, while Service Canada significantly reduces the administrative burden, makes government more efficient, consistent with privacy laws and practices.
- Achieve processing automation. Service Canada has already responded to the needs of Canadians for better, faster and more convenient services on the Internet. The use of information gathered electronically will be applied further by automating and enhancing the capabilities of the existing program systems to eliminate unnecessary processes and automate as appropriate.
- Collect information from the source where possible. By transforming vital events management, Service Canada will collect information on birth, deaths and marriages directly from the sources. It will also be extending this to include information from new Canadians as they arrive in Canada.

Service Canada is leveraging the collaborative potential across government to create new value for Canadians. It's about strengthening government and the Canadian federation and allowing governments to work together in the best interests of Canadians – the objective of this collaboration is the shared desire to better serve and improve outcomes for the people of Canada.

COLLABORATIVE, NETWORKED GOVERNMENT SERVICE: PRIORITIES AND PLANS**Priority: Transforming service to Canadians****Plans:**

- Building our capacity as the Government of Canada network of choice
- Building partnership strategies

Priority: Achieving client information integration**Plans:**

- Establishing a one client view and achieving information integration
- Achieving processing automation
- Transforming vital events management

Shared service arrangements

In addition to its external service delivery function, Service Canada is also responsible for the provision of human resources, information technology, administrative and financial services to HRSDC. As a shared service provider, Service Canada's objective is to bring together common support functions and enhance the efficiency and cost-effectiveness of these services.

Strategic Outcome

Achieve better outcomes for Canadians through service excellence

Service Indicators

- Increase in number of Service Canada points of service
- 24/7 availability of Internet – information and transaction
- Percentage of calls answered by an agent within 180 seconds
- Extend hours of service in Service Canada Centres
- Percentage of availability of Interactive Voice Response System
- Maintain or reduce number of official language complaints
- Establish Official Language Minority Community Groups points of service
- Offer service in languages other than English or French
- Provide forms online in formats accessible for people with disabilities
- Percentage of notifications sent within seven days of receipt of applications
- Percentage of Employment Insurance payments issued within 28 days of filing
- Percentage of passports delivered within 28 days of an application being submitted to Service Canada
- Percentage of Canada Pension Plan retirement first payment within the month of entitlement
- Percentage of Old Age Security first payments issued within 30 days of entitlement
- Percentage of pleasure craft licenses issued in one visit
- Percentage of Social Insurance Number issued in one visit
- Maintain or increase client satisfaction

Expected Results

- More responsive service for citizens
- Improved service outcomes
- Aligned service and policy outcomes
- Strengthened regional presence
- Strong and positive Service Canada brand

- Whole-of-government service delivery
- More efficient and effective operations
- Enhanced feedback for policy and program development

- Right payment/service, to the right person, at the right time
- Enhanced confidence in privacy and security of information
- Safe and secure common identifier

Program Activities

Seamless, Citizen-centred Service

Collaborative, Networked Government Service

Integrity

Priorities

Achieving and Rewarding Service Excellence Culture

Transforming Service to Canadians

Achieving Client Information Integration

Strengthening Accountability and Transparency

Plans

- Building for service excellence
- Achieving service excellence
- Rewarding service excellence

- Implementing our Service Strategies for Client Communities
- Undertaking business and product development
- Expanding our regional and community presence
- Integrating call centres
- Building our capacity as the Government of Canada network of choice
- Renewing Internet/Intranet services
- Building partnership strategies

- Establishing a one client view and achieving information integration
- Achieving processing automation
- Transforming vital events management

- Establishing enterprise integrity and risk management
- Meeting our saving commitments
- Reporting on our commitments to Canadians and Parliamentarians

Corporate Focus

Strengthening management and financial accountability

SERVICE CANADA: FINANCIAL AND HUMAN RESOURCES – PLANNED SPENDING

The two financial tables below align with HRSDC's 2006-2007 Main Estimates.

Financial and Human Resources			
	Planned Spending		
	2006-2007	2007-2008	2008-2009
<i>Financial Resources (in millions of dollars)</i>			
Human Resources and Skills Development Canada			
Gross Operating Expenditures	109.4	110.4	110.8
Social Development Canada			
Gross Operating Expenditures	447.1	447.8	449.9
Total	556.5	558.2	560.7
<i>Human Resources</i>			
Full Time Equivalents	6,305	6,231	6,234

Details by Programs and Services			
	2006-2007	2007-2008	2008-2009
<i>Financial Resources (in millions of dollars)</i>			
Service Delivery - Human Resources and Skills Development Canada	75.8	75.4	75.3
Allocated Corporate Services ^a	33.6	35.0	35.5
Sub-Total	109.4	110.4	110.8
Service Delivery - Social Development Canada	447.1	447.8	449.9
Total ^b	556.5	558.2	560.7
<i>Human Resources</i>			
Full Time Equivalents	6,305	6,231	6,234

^a Corporate Services resources related to the Minister's Office, the Deputy Minister's Office, the Comptroller's Office and the Shared Services have been prorated to each Strategic Outcome.

^b This represents Service Canada's resources for the delivery of programs and services. For a full accounting of Service Canada's operations, please refer to the following table.

SERVICE CANADA
2006-2009 RPP Expenditure Profile
(millions of dollars)

	Planned Spending		
	2006-2007	2007-2008	2008-2009
Budgetary			
Operating Costs (Vote 1&10) ^a	563.3	532.0	540.9
Delivery Cost related to:			
° Employment Insurance Account	1,138.4	1,135.6	1,133.8
° Canada Pension Plan	190.6	190.9	190.9
Sub-total ^a	1,329.0	1,326.5	1,324.7
Gross Operating Costs ^a	1,892.3 ^b	1,858.5 ^b	1,865.6 ^b
Delivered on behalf of Human Resources and Social Development Canada^c			
Voted Grants and Contributions (Vote 5&15)	686.1	558.4	545.5
Statutory Payments:			
° Old Age Security	23,255.0	24,139.0	25,285.0
° Guaranteed Income Supplement	6,820.0	7,219.0	7,512.0
° Allowance Payments	500.0	537.0	568.0
Sub-total Other Statutory Payments	30,575.0	31,895.0	33,365.0
Canada Pension Plan benefits	26,132.3	27,496.8	28,917.7
Employment Insurance benefits			
• Part I	12,442.0	13,058.0	13,661.0
• Part II	2,048.9	2,048.8	2,048.8
Sub-total Employment Insurance benefits	14,490.9	15,106.8	15,709.8
LMDA System Enhancement Costs	7.6	11.1	6.3
LMDA - Office Re-fit	1.0	-	-
Total Statutory Transfer Payments	71,206.8^d	74,509.7^d	77,998.8^d
Consolidated Total	73,785.2	76,926.6	80,409.9

a. The total Operating Costs and the Delivery Costs related to the 2005-2006 Forecast Spending for Service Canada are respectively \$515.6 million and \$1,396.0 million. The 2005-2006 Forecast Planned Spending total Gross Operating Costs is \$1,911.6 million.

b. Includes statutory items for employee benefit plans and payments to private collections agencies \$18.5M (\$21.0M in 2007-2008 and \$23.3M in 2008-2009).

c. The financial strategy for Service Canada establishes that statutory funds, including Employment Insurance, CPP, OAS and voted grants and contributions related to the delivery of specified programs will be allocated annually by HRSDC.

d. This amount directly benefits Canadians and is delivered on behalf of HRSDC.

SERVICE CANADA : Financial and Human Resources - Planned Spending

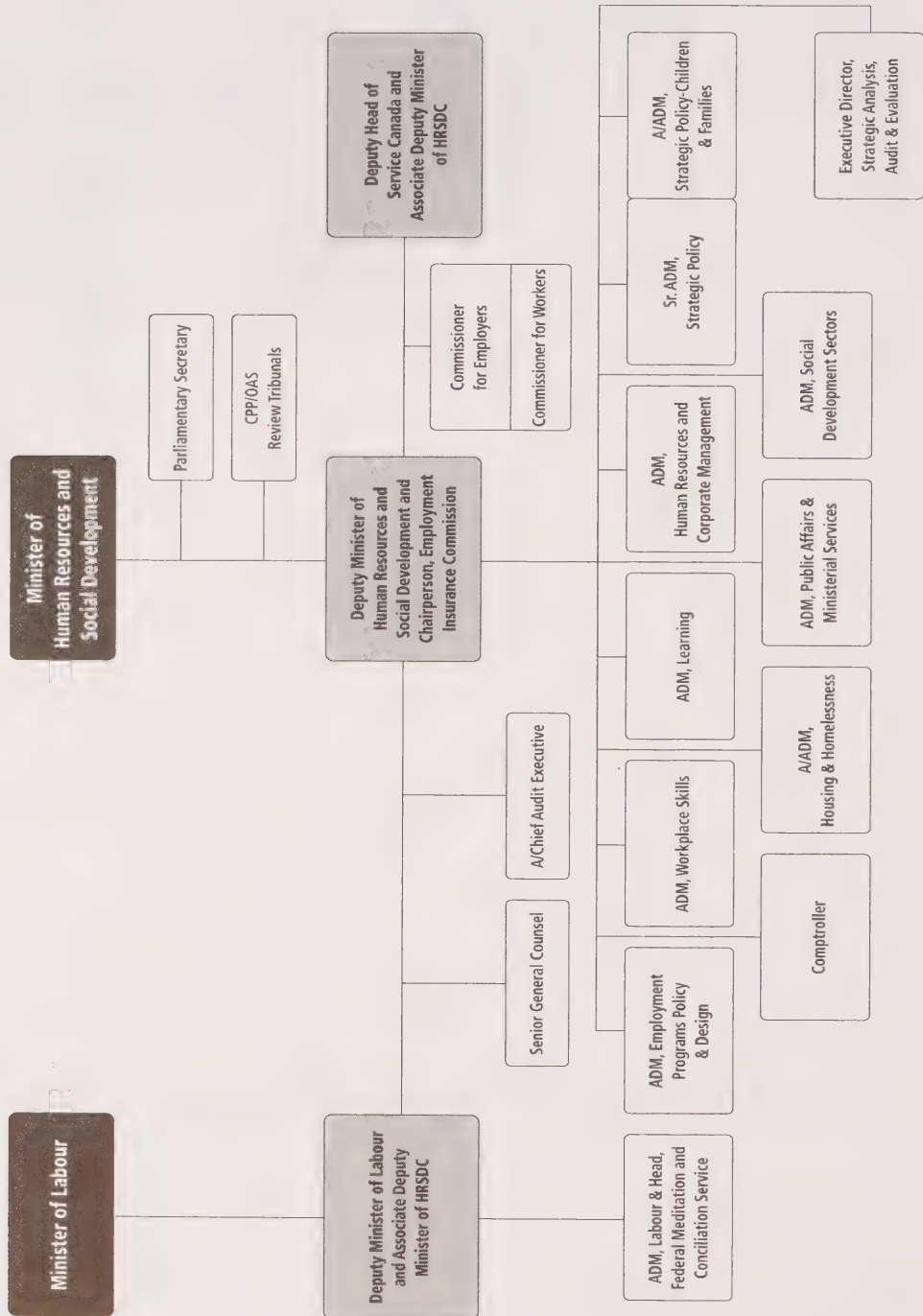
Gross Operating Expenditures Financial Resources (in millions of dollars)	2006-2007	2007-2008	2008-2009
<u>From:</u>			
Labour Market	1,259.9	1,246.2	1,252.7
Workplace Skills	53.1	52.6	50.7
Housing and Homelessness	22.8	1.5	1.5
Service Delivery	556.5	558.2	560.7
Total Service Canada	1,892.3	1,858.5	1,865.6
Seamless, Citizen-Centered Services	888.5	863.1	862.8
Integrity	974.3	966.1	973.4
Collaborative, Networked Government Services	29.5	29.3	29.4
Total Service Canada	1,892.3	1,858.5	1,865.6
Full Time Equivalent - Total	20,531	20,067	20,021



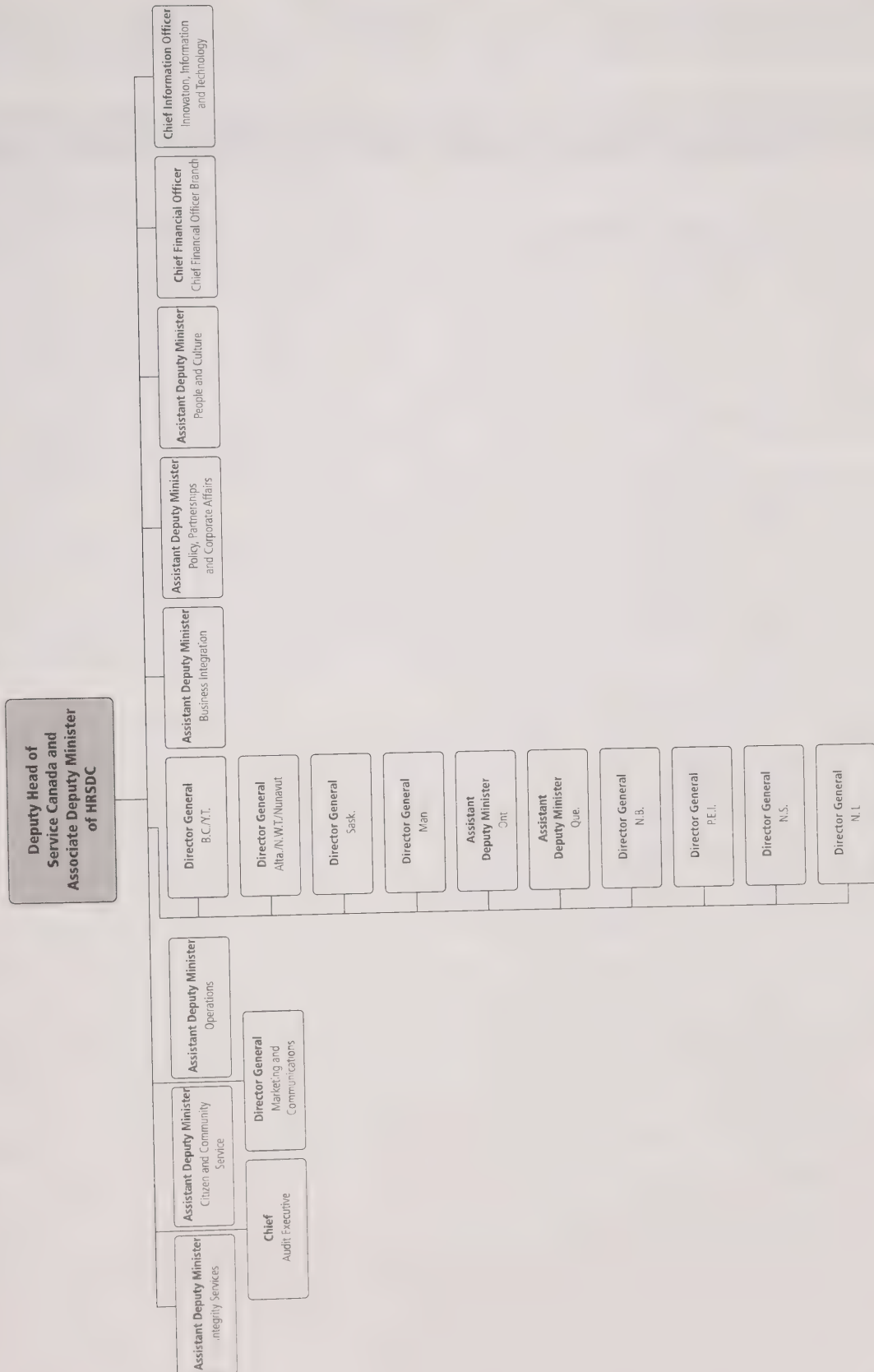
SUPPLEMENTARY INFORMATION

Organizational Information

Human Resources and Social Development Canada



HRSDC – Service Canada



Financial Tables

Please note that financial tables provided in this section present Human Resources and Skills Development and Social Development separately in order to align with the 2006-2007 Main Estimates.

TABLE 1A: HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA PLANNED SPENDING AND FULL TIME EQUIVALENTS

Program Activities (millions of dollars)	Total Authority	Planned Spending		
	2005-2006	2006-2007	2007-2008	2008-2009
Budgetary Main Estimates				
Employment Insurance	804.9	883.5	880.7	883.0
Employment Programs	893.0	969.1	968.6	933.8
Workplace Skills	168.8	184.5	181.7	120.0
Learning	929.5	1,226.9	1,193.0	1,201.5
Labour	205.8	217.3	222.2	224.6
Homelessness	180.0	188.3	3.3	3.3
Policy and Program Support	232.7	103.2	89.6	88.7
Service Delivery	118.8	128.1	128.7	129.0
Gross Budgetary Main Estimates	3,533.5	3,900.9	3,667.8	3,583.9
Less: Respendable Revenue	(1,347.0)	(1,425.8)	(1,414.9)	(1,414.6)
Net Budgetary	2,186.5	2,475.1	2,252.9	2,169.3
Non-Budgetary				
Loans disbursed under <i>Canada Student Financial Assistance Act</i>	1,040.8	981.5	769.1	560.8
Adjustments:				
Governor General Special Warrants	53.7	-	-	-
Others:				
- OBA Transfer - Freeze	(0.7)	-	-	-
- Carry - forward CRF	(5.9)	-	-	-
- Expenditure Review Committee Departmental Savings	(6.0)	-	-	-
- TB Vote 5	0.3	-	-	-
- Employee Benefit Plan (EBP)	(2.2)	-	-	-
Sub-Total Others:	(14.5)	-	-	-
Statutory Adjustment for the Public Accounts - Budgetary	57.5	-	-	-
Statutory Adjustment for the Public Accounts - Non-Budgetary	290.5	-	-	-
Procurement Savings ^a				
- Employment Insurance	n/a	(0.4)	-	-
- Employment Programs	n/a	(0.4)	-	-
- Workplace Skills	n/a	(0.1)	-	-
- Learning	n/a	(0.2)	-	-
- Labour	n/a	(0.3)	-	-
- Homelessness	n/a	(0.1)	-	-
- Policy and Program Support	n/a	(0.1)	-	-
- Service Delivery	n/a	(0.2)	-	-
Sub-Total Procurement Savings	n/a	(1.8)	-	-

TABLE 1A: HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA PLANNED SPENDING AND FULL TIME EQUIVALENTS (continued)

Program Activities (millions of dollars)	Total Authority	Planned Spending		
	2005-2006	2006-2007	2007-2008	2008-2009
CSLP - Reduction of Parental Contribution	n/a	-	15.0	20.0
Apprenticeship Incentive Grant	n/a	25.0	100.0	105.0
Foreign Credential Recognition Agency	n/a	2.0	10.0	6.0
5 Weeks Pilot Project	n/a	0.1	0.1	-
Government of Canada Advertising Plan	n/a	(0.5)	-	-
Cree Regional Authority	n/a	6.9	-	-
Winter Games Olympics 2010	n/a	0.2	0.2	0.4
Workplace Partners Panel	n/a	2.0	2.0	-
Workplace Skills Strategy	n/a	0.3	-	-
Wage Earner Protection Program	n/a	32.2	32.2	32.2
Workplace Skills - Trades and Apprenticeship Strategy	n/a	-	-	2.6
EI - Compassionate Care Benefits				
At Gross	n/a	0.7	0.7	0.7
EI recovery credited to the vote	n/a	(0.7)	(0.7)	(0.7)
Aboriginal Skills Employment Partnerships	n/a	5.3	-	-
Reduced Cost of the new Ministry - Smaller Cabinet	n/a	(0.9)	(0.9)	(0.9)
Canada Student Loan - Debt write-off	n/a	0.4	-	-
LMDA with Ontario - Workforce Adjustment Costs	n/a	8.5	-	-
LMDA with Ontario - EI Admin				
At Gross	n/a	8.6	8.6	8.6
EI recovery credited to the vote	n/a	(8.6)	(8.6)	(8.6)
Total Adjustments	387.2	79.7	158.6	165.3
Total Planned Spending (Net)	3,614.5	3,536.3	3,180.6	2,895.4
Specified Purpose Accounts				
Employment Insurance (EI)	16,111.6	16,260.7	16,877.4	17,473.9
Other Specified Purpose Accounts	51.4	48.3	45.4	42.7
Departmental Recoveries charged to the Canada Pension Plan	15.3	14.7	14.7	14.7
Departmental Employee Benefit Plan recoverable from EI Account	(149.7)	(140.7)	(139.1)	(138.6)
Total HRSDC Consolidated	19,643.1	19,719.3	19,979.0	20,288.1
Less: Non-Respendable Revenue	549.6	648.5	733.1	807.0
Plus: Cost of services received without charge	17.9	17.7	16.4	16.0
Total HRSDC	20,210.6	20,385.5	20,728.5	21,111.1
Full Time Equivalents	17,094	18,068	17,514	17,366

^a 2006-2007 gross procurement savings total \$10.1 million. After recoveries to the Employment Insurance Account of \$8.2 million, the Consolidated Revenue Fund portion (or net) is \$1.8 million.

Financial Highlights

Consolidated spending under Human Resources and Skills Development authorities is expected to be \$19,719.3 million in 2006-2007. This represents an increase of \$76.2 million over the 2005-2006 total authorities of \$19,643.1 million. The variance is mainly due to:

- an increase of \$31.3 million in net operating expenditures mainly due to:
 - additional administration resources of \$24.8 million for programs such as:
 - Trades and Apprenticeship Strategy (\$8.8 million) to work with provinces, territories and stakeholders to strengthen apprenticeships in the 45 Red Seal trades;
 - Workplace Skills Innovation (\$5.7 million) for the implementation of this program including activities such as assessment of projects, managing Calls for Proposals, accountability, compliance and evaluation;
 - Wage Earner Protection Program (\$3.2 million) which is designed to pay certain employees of bankrupt companies their unpaid wages and vacation pay up to \$3,000;
 - the new Canada Learning Bond and enhanced Canada Education Savings Grant (\$2.8 million),
 - National Literacy Secretariat (\$2.0 million) to develop a national strategy on literacy and essential skills;
 - Immigration Portal (\$1.3 million) for the development of information for prospective and new immigrants on credential and skills assessment and employment opportunities;
 - Foreign Credential Recognition Agency (\$1.0 million) announced in Budget 2006, to facilitate the consultation process and to take the first steps toward the establishment of a Canadian agency for assessment and recognition of foreign-trained immigrant credentials;
 - an increase for costs related to the signature of the Labour Market Development Agreement with the Province of Ontario (\$8.5 million),
 - allocation from the Government Advertising Plan and public notices campaigns (\$1.0 million),
 - These increase are offset by:
 - reduced costs of the new Ministry as a result of a smaller Cabinet (\$0.8 million); and
 - savings to be achieved through reduction of procurement expenditures (\$1.4 million);
- an increase of \$20.6 million in voted grants and contributions mostly related to:
 - increases for new or enhanced programs such as:
 - Workplace Skills Initiative (\$34.7 million) to support partnership-based projects to test new approaches to encourage employer investment in workplace skills development, with a focus on small and medium-sized enterprises;
 - the introduction of the Apprenticeship Incentive grant announced in Budget 2006 (\$25.0 million);
 - the National Literacy Secretariat to promote literacy in the workplace (\$8.6 million);
 - Foreign Credential Recognition (\$6.9 million) to work with partners and stakeholders to help immigrants maximize their skills potential and contributions to the Canadian labour market;
 - the World Urban Forum Vancouver 2006 (\$4.7 million), a worldwide event focusing on cities, shelter and urbanization;
 - the Sector Council Initiative (\$4.0 million) to support activities of new and exemplary sector councils in addressing skills and learning issues in Canada's labour market;
 - Training Centre Infrastructure Fund (\$3.7 million) to support employer-union training centres in the purchase of new machinery and equipment for trades that have undergone significant technological change, broadened scope, or new curricula;
 - Canada Learning Bond and Canada Education Savings Grants (\$3.0 million);

- Workplace Partners Panel (\$2.0 million) to provide a national forum for increased industry engagement, providing prominence and visibility, fostering ownership and engagement, and generating and to disseminating information on workplace skills issues;
 - Foreign Credential Recognition Agency (\$1.0 million) announced in Budget 2006, to facilitate the consultation process and to take the first steps toward the establishment of a Canadian agency for assessment and recognition of foreign-trained immigrant credentials;
 - Kativik Regional Government (\$1.0 million) for Inuit employment programming, pursuant to regular employment programs and services, funding for child care services, additional funding for special training programs needed to qualify the Inuit for jobs created by existing or planned developments in the Kativik Regional Government territory;
 - Cree Regional Authority (\$1.0 million) for the implementation of territorial programs in the James Bay territory in various skills development key areas such as tourism, hydro development, construction and forestry;
- These increases are offset by a decrease of \$60.0 million related to the transfer of the Toronto Waterfront Revitalization Initiative and a decrease of \$20.1 million related to the National Homelessness Initiative ;
- An increase of \$219.7 million in statutory payments mainly related to the introduction of the Canada Learning Bond (\$42.8 million), the enhancement and the increasing trend in the demand of the Canada Education Savings Grant (\$112.5 million) and the increase of the Canada Student Loans Program (\$34.5 million) and the Wage Earner Protection Program (\$28.7 million), which is designed to pay certain employees of bankrupt companies their unpaid wages and vacation pay up to \$3,000;
 - a net decrease of \$349.8 million for loans disbursed under the *Canada Student Financial Assistance Act* which is primarily due to the impact of loan reimbursements from borrowers in the loan portfolio; and
 - an increase of \$158.1 million for planned Employment Insurance (EI) Account spending.

For 2007-2008, the consolidated planned spending is anticipated to be \$19,979.0 million, which represents an increase of \$259.7 million from the 2006-2007 planned spending. The major changes are as follows:

- a net decrease of \$42.3 million in operating expenditures, mainly due to a decrease of \$22.2 million related to the administration of the National Homelessness Initiative, a decrease of \$8.5 million for one-time costs related to the signature of the Labour Market Development Agreement with the Province of Ontario, a reduction of \$7.5 million related to the allocation from the Government Advertising Plan, a decrease of \$6.2 million for the administration of the Canada Learning Bond and the Canada Education Savings Grant, and a decrease of \$5.6 million for the Canada Student Loan new recovery initiative. These decreases are offset by an increase of \$5.0 million for the Foreign Credential Recognition Agency;
- a decrease of \$83.2 million in voted grants and contributions, mainly due to a decrease of \$138.3 million for Homelessness Initiative and of \$9.6 million for the ending of the World Urban Forum, which is offset by an increase of \$75.0 million for the Apprenticeship Incentive grant announced in Budget 2006;
- a decrease of \$17.8 million in statutory payments mainly related to the Canada Education Savings Grant (\$15.0 million) reflecting the stabilization of the RESP industry following the introduction of the enhanced CESG in 2005;
- a net decrease of \$212.4 million for loans disbursed under the *Canada Student Financial Assistance Act* which is primarily due to the impact of loan reimbursements from borrowers in the loan portfolio; and
- an increase of \$618.3 million for the Employment Insurance Account mainly due to an increase in forecasted EI Part I benefits of \$616.0 million.

For 2008-2009, the consolidated planned spending is anticipated to be \$20,288.1 million, which represents an increase of \$309.1 million from the 2007-2008 planned spending. The major changes are as follows:

- an net decrease of \$22.1 million in operating expenditures, mainly due to reductions related to the administration of Trades and Apprenticeship Strategy (\$7.0 million), Workplace Skills Initiative (\$5.6 million), Foreign Credential Recognition Agency (\$3.0 million), National Literacy Program (\$1.9 million), Aboriginal Skills Employment Partnership (\$1.7 million) and Official Language Minority Communities (\$1.6 million),
- a decrease of \$84.3 million in voted grants and contributions, mainly due to a decrease in funding for Workplace Skills Initiative (\$37.7 million), Aboriginal Skills Employment Partnership (\$18.2 million), National Literacy Program (\$13.8 million), Official Language Minority Communities (\$12.0 million) and Training Centre Infrastructure Fund (\$4.2 million);
- an increase of \$29.5 million in statutory payments mainly related to an increased demand for the Canada Education Savings Grant (\$15.0 million) and the Canada Learning Bond (\$9.0 million) and the improvements to the Canada Student Loans program announced in Budget 2006 which will reduced the parental contribution (\$5.0 million);
- a net decrease of \$208.3 million for loans disbursed under the *Canada Student Financial Assistance Act* which is primarily due to the impact of loan reimbursements from borrowers in the loan portfolio; and
- an increase of \$596.0 million for the Employment Insurance (EI) Account mainly due to an increase in forecasted EI Part I benefits of \$603.0 million.

TABLE 1B: SOCIAL DEVELOPMENT CANADA PLANNED SPENDING AND FULL TIME EQUIVALENTS

(\$ millions)	Total Authority 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Social Investment (exclude OAS Benefits)	398.7	434.7	437.3	440.1
Social Investment - OAS Benefits	28,893.0	30,575.0	31,895.0	33,365.0
	29,291.7	31,009.7	32,332.3	33,805.1
Social Development Policy & Innovation	8.5	684.8	1,178.9	1,178.9
Service Delivery	476.1	508.8	507.7	509.8
Budgetary Main Estimates (gross)	29,776.3	32,203.3	34,018.9	35,493.8
Less: Respendable Revenue	(276.6)	(301.2)	(302.7)	(302.5)
Total Main Estimates	29,499.7	31,902.1	33,716.2	35,191.3
Adjustments:				
Governor General Special Warrants	31.3	-	-	-
Other:				
- TB Vote 5	9.9	-	-	-
- TB Vote 10	0.4	-	-	-
- Employee Benefit Plan (EBP)	11.1	-	-	-
- Freezes	(24.3)	-	-	-
- Statutory Adjustments for the Public Accounts	304.5	-	-	-
	301.6	-	-	-
Advertising Initiative Campaign	n/a	(2.0)	-	-
Universal Child Care Benefit	n/a	1,610.0	2,085.0	2,065.0
Child Care - Prov./Terr. Agreements	n/a	650.0	-	-
New Child care spaces	n/a	-	250.0	250.0
National Early Learning	n/a	(650.0)	(1,150.0)	(1,150.0)
Energy Cost Benefit	n/a	0.4	-	-
Reduced cost of the new Ministry - Smaller Cabinet	n/a	(2.0)	(2.0)	(2.0)
Procurement Savings ¹				
- Social Investment	n/a	(0.5)	-	-
- Social Development Policy & Innovation	n/a	(0.1)	-	-
- Service Delivery	n/a	(2.5)	-	-
Total Procurement Savings	n/a	(3.1)	-	-
Total Adjustments	332.9	1,603.3	1,183.0	1,163.0
Total Planned Spending (net)	29,832.6	33,505.4	34,899.2	36,354.3

TABLE 1B: SOCIAL DEVELOPMENT CANADA PLANNED SPENDING AND FULL TIME EQUIVALENTS (continued)

(\$ millions)	Total Authority 2005-2006	Planned Spending 2006-2007	Planned Spending 2007-2008	Planned Spending 2008-2009
Specified Purpose Accounts				
Canada Pension Plan (CPP)	25,385.0	26,530.1	27,896.9	29,318.8
Departmental Recoveries charged to EI	71.7	68.8	70.2	70.0
Departmental Employee Benefit Plan recoverable from CPP	(19.3)	(17.8)	(17.9)	(17.9)
Total SDC consolidated	55,270.0	60,086.5	62,848.4	65,725.2
Less: Non-Respendable Revenue	29.3	26.8	27.2	27.1
Plus: Cost of services received without charge	19.8	16.7	16.4	16.3
Total SDC	55,260.5	60,076.4	62,837.6	65,714.4
Full Time Equivalents	6,655	6,206	6,147	6,147

¹ Total savings of \$3.390 million less spendable revenues of \$0.339 million.

Financial Highlights

Consolidated spending under Social Development Canada authorities is expected to be \$60,086.5 million in 2006-2007. This represents an increase of \$4,816.5 million over the 2005-2006 total authorities of \$55,270.0 million. The variance is mainly due to:

- an increase of \$39.9 million in net operating expenditures mainly due to:
 - additional funds for the Participation and Activity Limitation Survey (\$6.6 million);
 - implementation of information campaigns directed at persons with disabilities, seniors, families and children (\$4.0 million);
 - administration of grant and contribution programs (\$8.4 million);
 - National Seniors Secretariat to provide a focal point for federal seniors-related efforts and support the development of a collaborative approach to seniors' issues with a diverse array of partners (\$2.3 million);
 - Official Languages Action Plan to support vibrant official language minority communities (\$1.1 million);
 - an increase to reference levels to reflect the repayment of resources which supported Year 2000 preparation (\$10.5 million); and
 - transfers from Human Resources and Skills Development (\$2.8 million);
 - These increases are offset by:
 - reduced costs of the new Ministry as a result of a smaller Cabinet (\$1.8 million); and
 - savings to be achieved through reduction of procurement expenditures (\$2.4 million);

- an increase of \$3,629.2 million in statutory payments mainly related to :
 - an increase of \$1,582.7 million to the Income Security Programs which reflects forecasts of client population and average benefit payments;
 - an increase of \$2,260.0 million for the introduction of the new Universal Child Care Benefit (\$1,610 million) and payments to provinces and territories (\$650.0 million) for the purpose of providing transition funding to phase-out the 2005 Early Learning and Child Care agreements signed by the previous government;
 - a decrease of \$210.5 million for Energy Cost Benefit payments, which are one-time payments of \$125 (or \$250 for couples) made in 2005-2006 to seniors entitled to receive the Guaranteed Income Supplement or the Allowance to deal with rising energy costs;
 - an increase of \$4.9 million for payments to private collection agencies;
 - a decrease of \$7.3 million to the employee benefit plan contributions; and,
 - an increase of \$1,145.1 million to the Canada Pension Plan (CPP). The increase in benefits of \$1,155.5 million reflects forecasts of client population and average benefit payments. This increase is offset by a decrease of \$10.4 million in the CPP administration costs.

For 2007-2008, consolidated planned spending is anticipated to be \$62,848.4 million, which represents an increase of \$2,761.9 million from the 2006-2007 planned spending. The major changes are as follows:

- an increase of \$1,397.2 million in statutory payments mainly related to an increase of \$1,320.0 million to the Income Security Programs based on forecasts of client population and average benefit payments, an increase of \$475.0 million related to the Universal Child Care Benefit, a reduction of \$650.0 million in payments to provinces and territories related to the transition funding to phase-out the 2005 Early Learning and Child Care agreements signed by the previous government and an increase of \$250.0 million for the creation of new child care spaces; and
- an increase of \$1,366.8 million to the Canada Pension Plan. This increase of \$1,364.5 million in benefits reflects forecasts of client population and average benefit payments.

For 2008-2009, consolidated planned spending is anticipated to be \$65,725.2 million, which represents an increase of \$2,876.8 million from the 2007-2008 planned spending. The major changes are as follows:

- an increase of \$1,452.3 million in statutory payments mainly related to an increase of \$1,470.0 million to the Income Security Programs and a decrease of \$20.0 million related to the Universal Child Care Benefits; and
- an increase of \$1,421.9 million to the Canada Pension Plan. This increase of \$1,420.9 million in benefits reflects forecasts of client population and average benefit payments.

TABLE 1C – PLANNED SPENDING CROSSWALK

Program Activities 2006-2007 2006-2007 Planned Spending (millions of dollars) - net	HUMAN RESOURCES AND SOCIAL DEVELOPMENT - PROGRAM ACTIVITIES										
	Labour Market	Workplace Skills	Learning	Labour	Social Investment	Children and Families	Housing and Homelessness	Service Delivery	Policy, Research and Communication	Other - Specified Purpose Accounts	Total
Human Resources and Skills Development Canada											
Employment Insurance	99.4	-	-	-	-	-	-	-	-	-	99.4
Employment Programs	667.2	-	-	-	-	-	-	-	-	-	667.2
Workplace Skills	-	157.3	-	-	-	-	-	-	-	-	157.3
Learning	-	-	2,193.0	-	-	-	-	-	-	-	2,193.0
Labour	-	-	-	171.2	-	-	-	-	-	-	171.2
Homelessness	-	-	-	-	-	-	188.1	-	-	-	188.1
Policy & Program Support	-	-	-	-	-	-	-	-	28.8	-	28.8
Service Delivery	-	-	-	-	-	-	-	31.3	-	-	31.3
Sub-Total HRSDC	766.6	157.3	2,193.0	171.2	-	-	188.1	31.3	28.8	-	3,536.3
Social Development Canada											
Social Investment	-	-	-	-	30,960.1	2,282.8	-	-	-	-	33,242.9
Social Development Policy & Innovation	-	-	-	-	-	-	-	-	45.8	-	45.8
Service Delivery	-	-	-	-	-	-	-	216.7	-	-	216.7
Sub-Total SDC	-	-	-	-	30,960.1	2,282.8	-	216.7	45.8	-	33,505.4
Consolidated Net Planned Spending	766.6	157.3	2,193.0	171.2	30,960.1	2,282.8	188.1	248.0	74.6	-	37,041.7
Specified Purpose Accounts											
Employment Insurance (EI) Account											
EI Part I - Income Benefits	12,442.0	-	-	-	-	-	-	-	-	-	12,442.0
EI Part II - Employment Benefits and Support Measures	2,137.5	-	-	-	-	-	-	-	-	-	2,137.5
EI Doubtful Accounts	-	-	-	-	-	-	-	-	-	57.0	57.0
EI Administration Costs	-	-	-	-	-	-	-	-	-	1,624.2	1,624.2
Sub-Total - EI Account	14,579.5	-	-	-	-	-	-	-	-	1,681.2	16,260.7
Canada Pension Plan (CPP)											
CPP Benefits	-	-	-	-	26,132.3	-	-	-	-	-	26,132.3
CPP Administration Costs	-	-	-	-	-	-	-	-	-	397.7	397.7
Sub-Total - CPP	-	-	-	-	26,132.3	-	-	-	-	397.7	26,530.0
Other Specified Purpose Accounts	48.3	-	-	-	-	-	-	-	-	-	48.3
Departmental Employee Benefit Plan recoverable from EI Account/CPP	-	-	-	-	-	-	-	-	-	(167.5)	(167.5)
Consolidated Total	15,394.4	157.3	2,193.0	171.2	57,092.4	2,282.8	188.1	248.0	74.6	1,911.4	79,713.2

TABLE 2A: HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA RESOURCES BY PROGRAM ACTIVITY

	2006-2007								
	Main Estimates Budgetary					Main Estimates Non-Budgetary	Adjustments (planned spending not in Main Estimates)		Total Planned Spending
(millions of dollars)		Grants and Contributions	Gross	Respendable Revenue	(Net) Total Main Estimates			Procurement Savings	
Program Activity	Operating					Loans	Other		
Employment Insurance	883.3	0.1	883.4	(783.3)	100.1	-	(0.3)	(0.4)	99.4
Employment Programs	429.0	540.2	969.2	(322.2)	647.0	-	20.6	(0.4)	667.2
Workplace Skills	96.1	88.4	184.5	(56.4)	128.1	-	29.3	(0.1)	157.3
Learning	162.2	1,064.7	1,226.9	(15.6)	1,211.3	981.5	0.4	(0.2)	2,193.0
Labour	213.4	3.9	217.3	(78.0)	139.3	-	32.2	(0.3)	171.2
Homelessness	40.4	147.9	188.3	-	188.3	-	(0.1)	(0.1)	188.1
Policy and Program Support	103.2	-	103.2	(81.1)	22.1	-	6.8	(0.1)	28.8
Service Delivery	128.1	-	128.1	(89.2)	38.9	-	(7.4)	(0.2)	31.3
Total	2,055.7	1,845.2	3,900.9	(1,425.8)	2,475.1	981.5	81.5	(1.8)	3,536.3

TABLE 2B: SOCIAL DEVELOPMENT CANADA RESOURCES BY PROGRAM ACTIVITY

	2006-2007							
	Main Estimates Budgetary					Adjustments (planned spending not in Main Estimates)		Total Planned Spending
(millions of dollars)	Operating	Grants and Contributions	Gross	Respendable Revenue	(Net) Total Main Estimates	Other	Procurement Savings	
Program Activity								
Social Investment	138.1	30,871.6	31,009.7	(30.4)	30,979.3	2,264.1	(0.5)	33,242.9
Social Development Policy and Innovation	34.8	650.0	684.8	(14.9)	669.9	(624.0)	(0.1)	45.8
Service Delivery	508.8	0.0	508.8	(255.9)	252.9	(33.7)	(2.5)	216.7
Total	681.7	31,521.6	32,203.3	(301.2)	31,902.1	1,606.4	(3.1)	33,505.4

TABLE 2C: PROGRAM BY ACTIVITY – CROSSWALK

	HUMAN RESOURCES AND SOCIAL DEVELOPMENT - PROGRAM ACTIVITIES									
Program Activities 2006-2007										
2006-2007 Planned Spending (millions of dollars) - net	Labour Market	Workplace Skills	Learning	Labour	Social Investment	Children and Families	Housing and Homelessness	Service Delivery	Policy, Research and Communication	Total
Former HRSDC										
Employment Insurance	99.4	-	-	-	-	-	-	-	-	99.4
Employment Programs	667.2	-	-	-	-	-	-	-	-	667.2
Workplace Skills	-	157.3	-	-	-	-	-	-	-	157.3
Learning	-	-	2,193.0	-	-	-	-	-	-	2,193.0
Labour	-	-	-	171.2	-	-	-	-	-	171.2
Homelessness	-	-	-	-	-	-	188.1	-	-	188.1
Policy & Program Support	-	-	-	-	-	-	-	-	28.8	28.8
Service Delivery	-	-	-	-	-	-	-	31.3	-	31.3
Sub-Total Former HRSDC	766.6	157.3	2,193.0	171.2	-	-	188.1	31.3	28.8	3,536.3
Former SDC										
Social Investment	-	-	-	-	30,960.1	2,282.8	-	-	-	33,242.9
Social Development Policy & Innovation	-	-	-	-	-	-	-	-	45.8	45.8
Service Delivery	-	-	-	-	-	-	-	216.7	-	216.7
Sub-Total Former SDC	-	-	-	-	30,960.1	2,282.8	-	216.7	45.8	33,505.4
Consolidated Total - Net Planned Spending	766.6	157.3	2,193.0	171.2	30,960.1	2,282.8	188.1	248.0	74.6	37,041.7

TABLE 3A: HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA VOTED AND STATUTORY ITEMS LISTED IN MAIN ESTIMATES

2006-2007			
(in millions of dollars)			
Voted or Statutory Item		Current Main Estimates	Previous Main Estimates
1	Operating expenditures	323.2	266.0
5	Grants and contributions	825.4	839.7
(S)	Minister of Human Resources and Skills Development - Salary and motor car allowance	0.1	0.1
(S)	Minister of Labour - Salary and motor car allowance	0.1	0.1
(S)	Payments related to the direct financing arrangement under the <i>Canada Student Financial Assistance Act</i>	304.6	263.8
(S)	The provision of funds for interest payments to lending institutions under the <i>Canada Student Loans Act</i>	0.1	0.1
(S)	The provision of funds for liabilities including liabilities in the form of guaranteed loans under the <i>Canada Student Loans Act</i>	9.5	11.7
(S)	The provision of funds for interest and other payments to lending institutions and liabilities under the <i>Canada Student Financial Assistance Act</i>	46.4	70.6
(S)	Canada Study Grants to qualifying full and part-time students pursuant to the <i>Canada Student Financial Assistance Act</i>	119.9	83.0
(S)	Grants to the trustees of Registered Education Savings Plans (RESPs) for the benefit of beneficiaries named under those RESPs, pursuant to the Canada Education Savings Grant regulations of the <i>Department of Human Resources Development Act</i>	-	430.0
(S)	Canada Education Savings Grant payments to Registered Education Savings Plans (RESPs) trustees on behalf of RESP beneficiaries to encourage Canadians to save for post-secondary education of children	575.0	-
(S)	Canada Learning Bond payments to Registered Education Savings Plans (RESPs) trustees on behalf of RESP beneficiaries to support access to post-secondary education to children from low-income families	45.0	-
(S)	Supplementary Retirement Benefits - Annuities agents' pensions	-	-
(S)	Labour adjustment benefits in accordance with the terms and conditions prescribed by the Governor in Council to assist workers who have been laid off as a result of import competition, industrial restructuring, or severe economic disruption	-	-
(S)	Civil Service Insurance actuarial liability adjustments	0.1	0.1
(S)	Payments of compensation respecting government employees and merchant seamen	48.0	51.0
(S)	Contributions to employee benefit plans	177.7	170.3
	Total Budgetary	2,475.1	2,186.5
	Loans disbursed under the <i>Canada Student Financial Assistance Act</i>	981.5	1,040.8
	Total Department	3,456.6	3,227.3

Financial Highlights

Human Resources and Skills Development Canada (HRSDC) Main Estimates for 2006-2007 total \$3,456.6 million, representing a net increase of \$229.3 million over the 2005-2006 Main Estimates amount of \$3,227.3 million. The major changes are as follows:

- an increase of \$57.2 million in net operating expenditures mainly due to:
 - an increase related to the administration of Canada Education Savings Grant and Canada Learning Bond (\$18.1 million);
 - collective bargaining increases for staff (\$12.8 million);
 - administration of programs such as:
 - Trades and Apprenticeship Strategy (\$9.5 million) to work with provinces, territories and stakeholders to strengthen apprenticeships in the 45 Red Seal trades;
 - Workplace Skills Innovation (\$5.7 million) for the implementation of this program including activities such as assessment of projects, managing Calls for Proposals, accountability, compliance and evaluation;
 - Labour Prevention Activities (\$4.4 million) to enhance Integrity of Labour Program Delivery;
 - Aboriginal Human Resources Development Strategy (\$2.5 million) to help Aboriginal people find, prepare for, obtain and maintain employment;
 - Canada Action Plan against Racism (\$2.4 million) Labour to implement a Racism-Free Workplace Strategy aimed at removing barriers facing the employment and upward mobility of visible minorities and Aboriginal peoples in Canada and facilitate the integration of skilled individuals in Canadian workplaces;
 - Immigration Portal (\$2.3 million) for the development of information for prospective and new immigrants on credential and skills assessment and employment opportunities;
 - National Literacy Secretariat (\$2.0 million) to develop a national strategy on literacy and essential skills;
 - Official Language Minority Communities (\$1.6 million) to promote the vitality of these communities by ensuring they have the tools to enable their contribution;
 - World Urban Forum Vancouver (\$1.3 million) to organize and host this five-day international event with delegates expected from over 150 countries, which will take place June 19 - 23, 2006. This is a worldwide event focusing on cities, shelter and urbanization;
 - Youth Internship Program (\$0.9 million) for the transfer of the Federal Public Service Youth Internship Program, which represents the Government of Canada's commitment as a large national employer to support the transition of young people, particularly at-risk youth, into the labour market; and
 - Training Centre Infrastructure Fund (\$0.7 million) for the implementation and administration of this program including activities such as assessment of projects, managing Calls for Proposals, accountability, compliance and evaluation;
 - allocation from the Government Advertising Plan for advertising campaigns related to Service Canada (\$3.0 million) to promote citizen-centered government services;
 - public notice campaigns (\$0.7 million) including \$0.65 million for Service Canada
 - a decrease of \$8.4 million related to the administration of grant and contribution programs; and
 - various transfers to SDC (\$2.8 million);
- a decrease of \$14.3 million in voted grants and contributions largely due a decrease of \$116.8 million related to the transfer of the Toronto Waterfront Revitalization Initiative. This decrease is reduced by increases of \$102.5 million for new or enhanced programs such as:
 - Workplace Skills Initiative (\$31.7 million) to support partnership-based projects to test new approaches to encourage employer investment in workplace skills development, with a focus on small and medium-sized enterprises;

- Aboriginal Human Resources Development Strategy (\$22.5 million) to help Aboriginal people find, prepare for, obtain and maintain employment;
- Official Language Minority Communities which provides for the development of human resources, economic growth and job creation and retention in those communities (\$12.0 million);
- Training Centre Infrastructure Fund (\$11.0 million) to support employer-union training centres in the purchase of new machinery and equipment for trades that have undergone significant technological change, broadened scope, or new curricula;
- the World Urban Forum Vancouver 2006, a worldwide event focusing on cities, shelter and urbanization, (\$9.6 million);
- the National Literacy Secretariat to promote literacy in the workplace (\$8.6 million);
- Early Learning and Child Care for First Nations' children living on reserve (\$6.8 million) to build new ELCC centres, upgrade existing centres and to increase access to training for ELCC workers.
- an increase of \$245.7 million in statutory program payments, mainly due to:
 - an increase of \$51.3 million in Canada Student Loans Program (CSLP) due to:
 - an increase of \$40.8 million in Payments related to the Direct Financing Arrangements under the Canada Student Financial Assistance Act due to enhancements to existing debt management measures, increase in administrative fees paid to participating provinces and changes to loans forgiveness;
 - a decrease of \$2.2 million in Liabilities under the Canada Student Loans Act due to downward estimate adjustments of Claim Payments base on the analysis of historical trend and the revised portfolio projections of the Guaranteed Loans portfolio;
 - a decrease of \$24.2 million in Interest and other Payments under the Canada Student Financial Assistance Act mainly due to enhancements to the existing debt management measures;
 - an increase of \$36.9 million for the Canada Study Grant mainly due to the implementation of two new Canada Access Grants for students with permanent disabilities and students from low-income families;
 - the introduction of the new Canada Learning Bond (\$45.0 million) which provide education savings for children in families entitled to the National Child Benefit;
 - increased demand for the Canada Education Savings Grant (\$145.0 million) which provide a grant to beneficiaries of a Registered Education Savings Plan. A new wording is being introduced in 2006-2007 Main Estimates due to coming into force of the Canada Education Savings Act and to include the purpose of encouraging Canadians to save for post-secondary education of children. \$575.0 million is reflected under the new wording and \$430.0 million under the old wording;
 - a net decrease of \$3.0 million for Workers' Compensation related to an anticipated increase in revenues from other government departments and Crown corporations under the cost recovery initiative for Workers' Compensation;
 - an increase of \$7.4 million to the Employee Benefit Plan costs related to an increase in salary costs;
- a decrease of \$59.3 million in non-budgetary payments for loans disbursed under the *Canada Student Financial Assistance Act*. This decrease is primarily due to the impact of increased loan reimbursements of \$288.4 million from borrowers on the loan portfolio, offset by an increase of \$229.1 million in Canada Student loans due to the increase of the loan limit from \$165 to \$210 per week of study.

TABLE 3B: SOCIAL DEVELOPMENT CANADA VOTED AND STATUTORY ITEMS LISTED IN MAIN ESTIMATES

2006-2007			
(\$ millions)			
Voted or Statutory Item	Voted or Statutory Wording	Current Main Estimates	Previous Main Estimates
10	Operating expenditures	295.6	244.0
15	Grants and contributions	946.6	280.8
(S)	Minister of Human Resources Development- Salary and motor car allowance	0.0	0.1
(S)	Old Age Security Payments	23,255.0	22,209.0
(S)	Guaranteed Income Supplement payments	6,820.0	6,233.0
(S)	Allowance Payments	500.0	451.0
(S)	Payments to private collection agencies pursuant to Section 17.1 of the <i>Financial Administration Act</i>	18.5	19.4
(S)	Contribution to employee benefit plans	66.4	62.4
	Total Department	31,902.1	29,499.7

Financial Highlights

Social Development Canada Main Estimates for 2006-2007 total \$31,902.1 million, representing a net increase of \$2,402.4 million over the 2005-2006 Main Estimates amount of \$29,499.7 million. The major changes are as follows:

- an increase of \$51.5 million in net operating expenditures mainly due to:
 - the signing of new collective agreements (\$10.7 million);
 - additional funds for the Participation and Activity Limitation Survey which is a comprehensive national survey of Canadians with disabilities who live in private households (\$6.6 million);
 - implementation of information campaigns directed at people with disabilities, seniors, families and children (\$6.0 million);
 - administration of grant and contribution programs (\$8.4 million),
 - Understanding Early Years to help give Canadian children the best possible start in life by providing communities with information on the readiness-to-learn of their children (\$5.0 million);
 - New Horizons supporting local projects across Canada that encourage seniors to contribute to their communities through their social participation and active living (\$1.9 million);
 - Voluntary Sector Strategy a partnering of the federal government and the voluntary sector to put in place a framework of community-based collaboration and innovation to improve the economic and social well-being of Canadians (\$1.5 million);
 - National Seniors Secretariat to provide a focal point for federal seniors-related efforts and support the development of a collaborative approach to seniors' issues with a diverse array of partners (\$2.3 million);
 - Official Languages Action Plan to support vibrant official language minority communities, (\$1.1 million);
 - an increase to reference levels to reflect the repayment of resources which supported Year 2000 preparation (\$10.5 million); and
 - various transfers from Human Resources and Skills Development (\$2.8 million).

- an increase of \$665.9 million in voted grants and contributions largely due to:
 - payments to provinces and territories for the purpose of providing transition funding (\$650.0 million) to provinces and territories to phase-out the 2005 Early Learning and Child Care agreements signed by the previous government;
 - expanding Understanding the Early Years, to gather information about their children's readiness to learn, as well as information on influencing factors and local supports (\$5.6 million);
 - the New Horizon for Seniors program supporting local projects across Canada that encourage seniors to contribute to their communities through their social participation and active living (\$7.8 million); and
 - Grant to The Canadian Policy Research Networks Inc., which is an independent, non-profit research organization with charitable status. CPRN's mission is to inform the development of social and economic policy in Canada through research and public engagement (\$3.0 million).
- an increase of \$1,685.0 million in statutory program payments, mainly due to:
 - an increase of \$1,682.0 million to the Income Security Programs comprised of: the Old Age Security payments (\$1,046.0 million); the Guaranteed Income Supplement payments offering a supplemental revenue to the Old Age Security beneficiaries with low income (\$587.0 million), and the Allowance payments, offering an additional income-tested benefit for low income surviving persons and for couples living on the Old Age Security benefits of only one spouse or common-law partner (\$49.0 million). The increase is explained by the increasing overall population in persons 65+ over in receipt of OAS basic (2.31%), GIS (3.90%) and Allowance (4.95%), plus the increasing average annual benefit amount - OAS basic (2.73%), GIS (2.28%) and Allowance (4.57%);
 - a decrease of \$0.9 million for payments to private collection agencies as the default accounts will be sent more rapidly to the agencies; and
 - an increase of \$4.0 million to the employee benefit plan contributions related to an increase in salary costs.

TABLE 4A: HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA SERVICES RECEIVED WITHOUT CHARGE

(millions of dollars)	2006-2007
Contributions covering employers' share of employees' insurance premiums and expenditures paid by Treasury Board Secretariat	14.0
Salary and associated expenditures of legal services provided by the Department of Justice Canada	3.7
Total 2006-2007 Services received without charge	17.7

TABLE 4B: SOCIAL DEVELOPMENT CANADA SERVICES RECEIVED WITHOUT CHARGE

2006-2007	
(\$ millions)	Total
Contributions covering employers' share of employees' insurance premiums and expenditures paid by TBS	16.3
Worker's Compensation coverage provided by Human Resources and Skills Development	0.3
Salary and associated expenditures of legal services provided by Justice Canada	0.1
Total 2006-2007 Services received without charge	16.7

TABLE 5: HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA LOANS (NON-BUDGETARY)

(millions of dollars)	Total Authority	Planned Spending		
	2005-2006	2006-2007	2007-2008	2008-2009
Learning				
Loans disbursed under the <i>Canada Student Financial Assistance Act</i>	1,331.3	981.5	769.1	560.8
Total	1,331.3	981.5	769.1	560.8

**TABLE 6A: HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA
SOURCES OF RESPONDABLE AND NON-RESPONDABLE REVENUE**

RESPONDABLE REVENUE				
(millions of dollars)	Total Authority	Planned Revenue		
	2005-2006	2006-2007	2007-2008	2008-2009
Employment Insurance				
EI Recovery	754.2	780.0	778.6	781.3
Employment Programs				
EI Recovery	328.7	330.1	330.7	325.0
Workplace Skills				
EI Recovery	69.1	62.0	56.7	56.7
Learning				
EI Recovery	7.4	15.8	15.6	15.6
Labour				
Worker's Compensation - OGD	76.6	77.4	78.4	80.4
EI Recovery	0.6	0.6	0.6	0.6
	<u>77.2</u>	<u>78.0</u>	<u>79.0</u>	<u>81.0</u>
Homelessness	-	-	-	-
Policy and Program Support				
EI Recovery	107.9	91.3	86.9	86.6
CPP Recovery	2.2	-	-	-
	<u>110.1</u>	<u>91.3</u>	<u>86.9</u>	<u>86.6</u>
Service Delivery				
EI Recovery	77.7	63.3	63.1	63.0
CPP Recovery	13.1	14.7	14.7	14.7
	<u>90.8</u>	<u>78.0</u>	<u>77.8</u>	<u>77.7</u>
Total Respondable Revenue	1,437.5	1,435.2	1,425.3	1,423.9

**TABLE 6A: HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA
SOURCES OF RESPENDABLE AND NON-RESPENDABLE REVENUE (continued)**

(millions of dollars)	Total Authority	Planned Revenue		
	2005-2006	2006-2007	2007-2008	2008-2009
NON-RESPENDABLE REVENUE				
Employment Insurance				
EBP Recovery from EI	94.1	91.8	90.9	91.0
Employment Programs				
EBP Recovery from EI	30.2	25.8	25.8	25.3
Workplace Skills				
EBP Recovery from EI	8.0	6.4	6.3	6.2
Learning				
EBP Recovery from EI	0.7	1.3	1.3	1.3
Canada Student Loans	395.6	503.6	589.5	663.8
	396.3	504.9	590.8	665.1
Labour - Service Fees	2.2	2.2	2.4	2.5
Homelessness - Recovery of EBP	-	-	-	-
Policy and Program Support Recovery of EBP				
EBP Recovery from EI	4.1	6.6	6.2	6.2
EBP Recovery from CPP	0.1	-	-	-
	4.2	6.6	6.2	6.2
Service Delivery Support Recovery of EBP				
EBP Recovery from EI	12.5	8.7	8.6	8.6
EBP Recovery from CPP	2.1	2.1	2.1	2.1
	14.6	10.8	10.7	10.7
Total Non-Respendable Revenue	549.6	648.5	733.1	807.0
Total Respendable and Non-Respendable Revenue	1,987.1	2,083.7	2,158.4	2,230.9

**TABLE 6B: SOCIAL DEVELOPMENT CANADA
SOURCES OF RESPENDABLE AND NON-RESPENDABLE REVENUE**

RESPENDABLE REVENUE				
(millions of dollars)	Total Authority	Planned Revenue		
	2005-2006	2006-2007	2007-2008	2008-2009
Social Investment				
EI Recovery	-	5.7	5.4	5.4
CPP Recovery	52.7	43.3	43.6	43.5
	52.7	49.0	49.0	48.9
Social Development Policy and Innovation				
EI Recovery	11.5	8.6	9.2	9.2
CPP Recovery	-	12.9	12.7	12.7
	11.5	21.5	21.9	21.9
Service delivery				
EI Recovery	60.2	54.5	55.6	55.5
CPP Recovery	187.8	175.9	176.2	176.2
	248.0	230.4	231.8	231.7
Total Respendable Revenue	312.2	300.9	302.7	302.5
NON-RESPENDABLE REVENUE				
Social Investment				
EBP Recovery from EI	-	0.3	0.5	0.5
EBP Recovery from CPP	4.2	2.5	2.5	2.5
User fee: Searches of the CPP and OAS data banks to locate individuals	0.1	0.1	0.1	0.1
	4.3	2.9	3.1	3.1
Social Development Policy and Innovation				
EBP Recovery from EI	1.2	0.7	0.6	0.6
EBP Recovery from CPP	-	0.9	0.9	0.9
	1.2	1.6	1.5	1.5
Service Delivery				
EBP Recovery from EI	6.8	6.0	6.1	6.1
EBP Recovery from CPP	15.1	14.4	14.6	14.5
User fee: Social Insurance Number Replacement Card Fee	1.9	1.9	1.9	1.9
	23.8	22.3	22.6	22.5
Total Non-Respendable Revenue	29.3	26.8	27.2	27.1
Total Respendable and Non-respendable Revenue	341.5	327.7	329.9	329.6

TABLE 6C: SOURCES OF RESPONDABLE AND NON-RESPONDABLE REVENUE – CROSSWALK

	HUMAN RESOURCES AND SOCIAL DEVELOPMENT - PROGRAM ACTIVITIES									
Program Activities 2006-2007										
2006-2007 Total Revenue (millions of dollars)	Labour Market	Workplace Skills	Learning	Labour	Social Investment	Children and Families	Housing and Homelessness	Service Delivery	Policy, Research and Communication	Total
Former HRSDC										
Employment Insurance	871.8	-	-	-	-	-	-	-	-	871.8
Employment Programs	355.9	-	-	-	-	-	-	-	-	355.9
Workplace Skills	-	68.4	-	-	-	-	-	-	-	68.4
Learning	-	-	520.7	-	-	-	-	-	-	520.7
Labour	-	-	-	80.2	-	-	-	-	-	80.2
Homelessness	-	-	-	-	-	-	-	-	-	-
Policy & Program Support	-	-	-	-	-	-	-	-	97.9	97.9
Service Delivery	-	-	-	-	-	-	-	88.8	-	88.8
Sub-Total Former HRSDC	1,227.7	68.4	520.7	80.2	-	-	-	88.8	97.9	2,083.7
Former SDC										
Social Investment	-	-	-	-	52.0	-	-	-	-	52.0
Social Development Policy & Innovation	-	-	-	-	-	-	-	-	23.0	23.0
Service Delivery	-	-	-	-	-	-	-	252.7	-	252.7
Sub-Total Former SDC	-	-	-	-	52.0	-	-	252.7	23.0	327.7
Consolidated Total Revenue	1,227.7	68.4	520.7	80.2	52.0	-	-	341.5	120.9	2,411.4

TABLE 7: MAJOR REGULATORY INITIATIVES

Regulations	Planned Results
Strategic Outcome: Enhanced Canadian productivity and participation through efficient and inclusive labour markets, competitive workplaces and access to learning	
No major regulatory initiatives have been identified for the <i>Employment Insurance</i> (EI) Program in 2006-2007. Regulatory changes to support EI operations and administration will be undertaken as required.	
<i>Employment Insurance (EI) Fishing Regulations</i> – section 77.4	The change will ensure that entitlement to EI fishing benefits take into account the existence of Quebec's Parental Insurance Plan.
Employment Insurance (EI) Regulatory Amendment – Extended EI Benefits Pilot Project	The change will put in place the announced pilot project to test the impacts of increasing entitlement by five (5) additional weeks of regular benefits to EI claimants, up to a maximum of 45 weeks of benefits, in 21 EI regions.
Employment Insurance Regulatory Amendment - Compassionate Care Benefit	The change will broaden the definition of family member for determining eligibility for the Compassionate Care Benefit.
Strategic Outcome: Enhanced Canadian productivity and participation through efficient and inclusive labour markets, competitive workplaces and access to learning	
Housekeeping improvements to the Canada Student Loans Program regulatory framework: The Canada Student Loans Program is planning to move ahead with regulatory changes to make the program more effective and efficient as well as to clarify the rules regarding certain benefits.	The legislative and regulatory framework of the Canada Student Loans Program has undergone frequent, almost yearly, changes since the inception of the program. Ongoing legislative and regulatory improvements are required in order to keep step with these changes.
Amendments to the <i>Canada Student Financial Assistance Regulations</i> and the <i>Canada Student Loans Regulations</i> are required to implement these changes.	
Strategic Outcome: Safe, healthy, fair, stable, cooperative and productive workplaces and effective international labour standards	
<i>Employment Equity Act – Employment Equity Regulations</i>	Updated Regulations will include these consequential changes: <ul style="list-style-type: none"> • Update the census Metropolitan Areas to the 2002 Statistics Canada publication • Update the National Occupational Classification to the 2001 codes • Introduce the North American Industry Classification System • Make administrative and consequential changes (i.e. changing dates and Department name)
Workplace Violence Prevention Regulations	These regulations are intended to prevent direct or indirect acts of violence in workplaces subject to federal jurisdiction.

TABLE 8: TRANSFER PAYMENTS PROGRAMS

Over the three fiscal years (2006-2007 to 2008-2009), HRSDC will manage the following transfer payment programs in excess of \$5 million:

1. Youth Employment Strategy
2. Adult Learning, Literacy and Essential Skills Program
3. Canada Student Loans Program – Liabilities
4. Canada Student Loans Program – Interest Payments and Liabilities
5. Canada Student Loans Program – Direct Financing Arrangement
6. Canada Study Grants and Canada Access Grants
7. Canada Learning Bond
8. Canada Education Savings Grant
9. Old Age Security
10. Guaranteed Income Supplement
11. Allowance Payments
12. Social Development Partnership Program
13. New Horizons for Seniors
14. Canadian Policy Research Networks
15. Opportunities Fund for Persons with Disabilities
16. Multilateral Framework for Labour Market Agreements for Persons with Disabilities
17. Early Learning and Child Care
18. Aboriginal Skills and Employment Partnerships
19. Aboriginal Human Resources Development Strategy
20. Aboriginal Human Resources Development Program – the Joint Voisey's Bay Employment and Training Authority (JETA)
21. Training Centre Infrastructure Fund
22. Sector Council Program
23. Foreign Credential Recognition Program
24. Enabling Fund for Official Language Minority Communities
25. National Homelessness Initiative
26. Workplace Skills Strategy
27. Universal Child Care Benefit

Further information on these projects can be found at http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_e.asp

TABLE 9: FOUNDATIONS (CONDITIONAL GRANTS)

In 2006-2007, HRSDC will contribute to the Winnipeg Foundation using conditional grants; the remaining foundations received one-time funding in past years:

1. Canadian Council on Learning
2. The Canada Millennium Scholarship Foundation
3. The Peter Gzowski Foundation for Literacy
4. The Winnipeg Foundation
5. Read to Me! Foundation Inc.

Further information on these projects can be found at http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_e.asp

TABLE 10: HORIZONTAL INITIATIVES

During fiscal year 2006-2007, HRSDC will be involved in the following horizontal initiatives. Unless otherwise mentioned in the list, HRSDC acts as the lead Department for these initiatives.

1. Youth Employment Strategy
2. Sector Council Program
3. Labour Market Development Agreements
4. Foreign Credential Recognition Program
5. Canada Student Loans Program
6. National Child Benefit
7. Multilateral Framework for Early Learning and Child Care
8. Early Childhood Development Agreement
9. Aboriginal Skills and Employment Partnership Program
10. Aboriginal Human Resources Development Strategy
11. Service Canada
12. Action Plan for Official Languages (Privy Council Office is the lead)
13. National Homelessness Initiative

Supplementary information on Horizontal Initiatives can be found at

http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_e.asp

TABLE 11: SUSTAINABLE DEVELOPMENT STRATEGY

In February 2006 the Departments of Social Development Canada and Human Resources and Skills Development Canada were combined into the new Department of Human Resources and Social Development. The sustainable development efforts of the former departments have been integrated and the priority for the planning period will be to complete the development of a new HRSDC Sustainable Development Strategy for 2007-2009. The Department will also continue to work toward completing the commitments from the final year of the 2004-2006 SDS.

The new departmental sustainable development strategy will articulate how environmental economic and social factors are considered in the development of policy and programs as well as in day-today operations.

Objectives for the Planning Period

- The Department will finalize a vision and policy that will clearly define our role in contributing to sustainable development and provide a long-term framework and direction for HRSDC's sustainable development objectives.
- Develop the HRSDC Sustainable Development Strategy 2007-2009.
- Support the Government of Canada's efforts in the social and labour market dimensions of sustainable development.
- Develop new occupational health and safety regulations addressing prevention of violence at work and injury prevention programs.
- The Department will put in place a process to ensure that a Strategic Environmental Assessment is conducted for policy, plan and program proposals.
- The Department will continue to work towards achieving a number of the sustainable development targets aimed at 'greening' the operations of the Department (e.g., building energy, vehicle fleets, green procurement).

Detailed information on the current Sustainable Development Strategy (SDS-III), including specific goals, objectives and targets can be seen at the following departmental website:

<http://www.hrsdc.gc.ca/en/cs/fas/as/sds/sdd.shtml>.

TABLE 12: INTERNAL AUDITS AND EVALUATIONS STRATEGY

As a result of the departmental reorganization, the internal audit and evaluation groups are redefining the audit and evaluation universe as well as updating and realigning risk factors to produce a new risk-based multi-year audit and evaluation plan reflective of the new departmental priorities and accountabilities. The Office of the Comptroller General's plan for horizontal audits and the audit schedule of the Office of the Auditor General will potentially affect the departmental plan. The following internal audit and evaluation projects should be viewed within this context.

Evaluations to be completed in 2006-2007	Internal Audit Plan 2006-2007
<p>Employment Insurance 5 Weeks Seasonal Work Pilot Formative Evaluation of Compassionate Care Employment Insurance Summative Evaluation</p> <p>Employment Programs Summative Evaluation of Labour Market Development Agreement – Alberta Summative Evaluation of Labour Market Development Agreement – New Brunswick Summative Evaluation of Labour Market Development Agreement – Saskatchewan Summative Evaluation of Employment Benefits and Support Measures – Ontario Evaluation of Voisey's Bay Pilot Project</p> <p>Workplace Formative Evaluation of the Foreign Credential Recognition Program Summative Evaluation of Sector Council Programs</p> <p>Labour Strategic Evaluation of Workplace Equity Programs International Trade Labour Program (Mid-term Evaluation)</p> <p>Learning Formative Evaluation of National Literacy Secretariat Summative Evaluation of Office of Learning Technologies</p> <p>Homelessness and Housing Summative Evaluation of National Homelessness Initiative</p> <p>People with Disabilities Summative Evaluation of the Opportunities Fund for Persons with Disabilities, Phase I Formative Evaluation of the Community Inclusion Initiative</p> <p>Other Evaluation of the World Urban Forum 3 Lessons Learned and Synthesis Studies</p>	<p>Carry-over Projects from 2005-2006 2004-2005 Attest Audit of the Administrative Costs Charged to the Canada Pension Plan Account Canada Pension Plan – Disability Phase I Canada Pension Plan – Disability Phase II Guaranteed Income Supplement New Horizons for Seniors Program Canada Student Loans Program – Provinces Departmental (Human Resources and Skills Development) Financial Statement Review 2004-2005</p> <p>New Projects for 2006--2007 World Urban Forum – Phase I World Urban Forum – Phase II Grants and Contributions – Segregation of Duties (nationally delivered programs) Grants and Contributions – Proposal Assessment Process Grants and Contributions – Claims and Payment Processing Accounts Payable and Accrued Liabilities Controls Assessment Management of Canada Student Loans Program Direct Loans Accounts Receivable Audit of Values and Ethics (HRSDC) Departmental Financial Control Framework Review 2005-2006 2005-2006 Attest Audit of the Administrative Costs Charged to the Canada Pension Plan Account Understanding the Early Years International Social Security Agreements / International Benefits Canada Pension Plan – Retirement Pension (Control Framework and Policy)</p> <p>Labour Occupational Safety and Health Federal Mediation and Conciliation Services</p>

TABLE 12: INTERNAL AUDITS AND EVALUATIONS STRATEGY (continued)

	<p>Service Canada</p> <p>Grants and Contributions Financial and Activity Monitoring</p> <p>Grants and Contributions Segregation of Duties (regionally and locally delivered programs)</p> <p>Spot Audits of Grants and Contributions—Recipients</p> <p>Record of Employment—Web</p> <p>Integrity Branch Risk Based File Selection Methodology</p> <p>Employment Insurance Segregation of Duties (follow-up)</p> <p>Compliance with Information Technology Security Standards</p> <p>Human Resources Capacity Audit of Information Technology Centres</p> <p>Systems Under Development (SUD)—Income Security Program</p> <p>Information Management—Management Control Framework</p> <p>Old Age Security Payment</p> <p>Soundness of General Information Technology Controls</p> <p>Audit of Procurements</p> <p>Compensation and Benefits</p> <p>Audit of Values and Ethics (Service Canada)</p> <p>Canada Pension Plan—Retirement Pension (Benefit Processing)</p> <p>Financial Audits</p> <p>Payroll Expenditures</p> <p>Operating and Maintenance</p> <p>Grants and Contribution Payments</p> <p>Financial—Opening Balances (March 31, 2006)</p> <p>Assurance on Presentation of 2005–2006 Statements</p>
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Specified Purpose Accounts

Introduction

Specified Purpose Accounts (SPA) are special categories of revenues and expenditures. They report transactions of certain accounts where enabling legislation requires that revenues be earmarked and that related payments and expenditures be charged against such revenues. The transactions of these accounts are to be accounted for separately.

HRSDC is responsible for the stewardship of four such accounts:

- the Employment Insurance (EI) Account
- the Canada Pension Plan (CPP)
- the Government Annuities Account
- the Civil Service Insurance Fund

The EI Account is a consolidated SPA and is included in the financial reporting of the Government of Canada. Consolidated SPAs are used principally where the activities are similar in nature to departmental activities and the transactions do not represent liabilities to third parties but, in essence, constitute Government revenues and expenditures.

The CPP is a SPA but is not consolidated as part of the Government of Canada financial statements. It is under joint control of the Government and participating provinces. As administrator, the Government's authority to spend is limited to the balance of the Plan.

The Government Annuities Account is a consolidated SPA and is included in the financial reporting of the Government of Canada. It was established by the *Government Annuities Act*, and modified by the *Government Annuities Improvement Act*, which discontinued sales of annuities in 1975. The account is valued on an actuarial basis each year, with the deficit or surplus charged or credited to the Consolidated Revenue Fund.

The Civil Service Insurance Fund is a consolidated SPA and is included in the financial reporting of the Government of Canada. It was established by the *Civil Service Insurance Act*. Pursuant to subsection 16(3) of the *Civil Service Insurance Regulations*, the amount of actuarial deficits is transferred from the Consolidated Revenue Fund to the Civil Service Insurance Account in order to balance the assets and liabilities of the program.

Employment Insurance Account

Description

The Employment Insurance (EI) Account was established in the Accounts of Canada by the *Employment Insurance Act (EI Act)* to record all amounts received or paid out under that Act. The *EI Act* provides short-term financial relief and other assistance to eligible workers. The program covers all workers in an employer-employee relationship. Self-employed fishers are also included under special regulation of the *EI Act*. In 2005, 15.4 million Canadians contributed to the Program and 2.5 million received benefits.

Employment Insurance provides:

Income Benefits under Part I of the *EI Act* provide temporary income support to claimants, including self-employed fishers, while they look for work. This includes work-sharing agreements for temporary work shortages to allow employees to receive pro-rated EI benefits while working for part of a week, thus avoiding layoffs. EI also provides four types of special benefits: maternity benefits, payable to biological mothers for work missed as a result of pregnancy and childbirth; parental benefits, payable to both biological and adoptive parents for the purpose of caring for a new born or adopted child; sickness benefits, payable to claimants who are too ill to work; and compassionate care benefits, payable to claimants who provide care to a gravely ill or dying family member.

Employment Benefits under Part II of the *EI Act* through a set of Employment Benefits and Support Measures that can be tailored to meet the needs of individuals and local circumstances. The Government of Canada has Labour Market Development Agreements with the governments of most provinces and territories. These enable provincial and territorial governments to assume direct responsibility for the design and delivery of these benefits or to take part in co-management arrangements with the federal government.

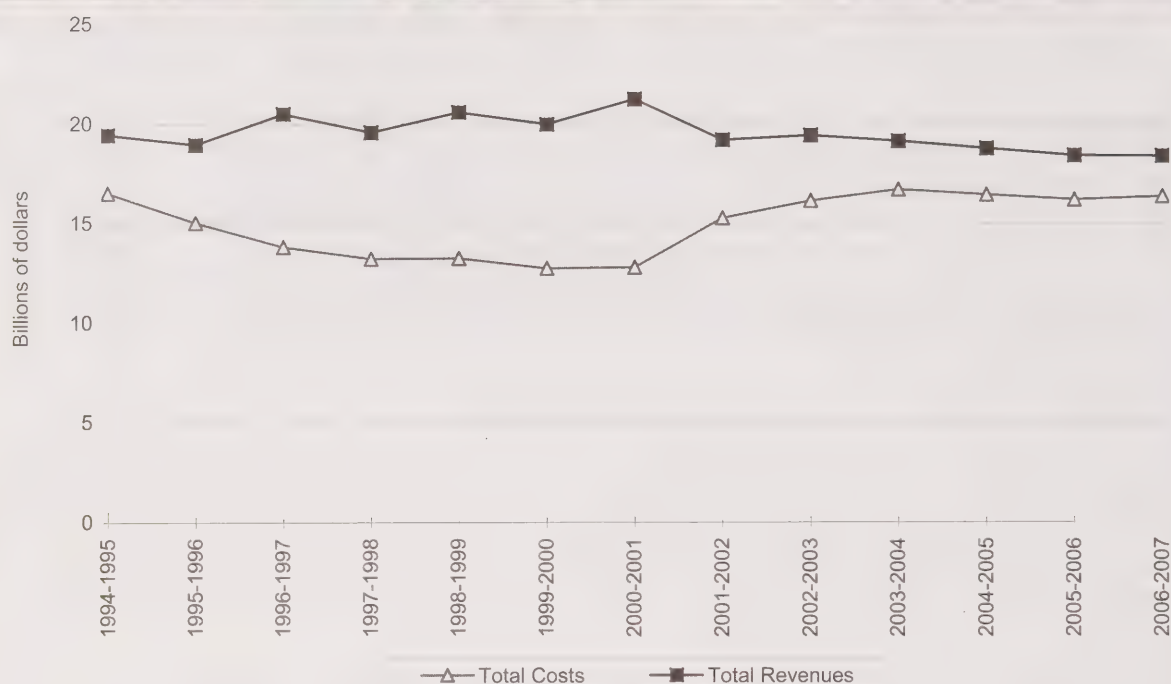
Employers and workers pay all costs associated with EI through premiums. Benefits and administrative costs are paid out of the Consolidated Revenue Fund and charged to the EI Account. A surplus in the Account generates interest at a rate established by the Minister of Finance, which is currently set at 90% of the monthly average of the three-month Treasury bill rate.

Financial Summary

The premium rate for 2006 was set on a breakeven basis. However, as the economy is expected to be better than that was expected at the time the 2006 premium rate was set, in 2006-2007, premium revenue is now expected to be about \$400 million higher than the benefits and administrative costs. Total revenues, including interest earned, are expected to exceed total costs by \$2.4 billion, which will increase the cumulative surplus to \$53.1 billion as of March 31, 2007. The changes in benefits and premium are explained as follows:

- Benefits are expected to increase by 1.1% to \$14.6 billion. This is due to a 3.4% expected increase in the average weekly benefits offset by a 3.0% expected decrease in the number of beneficiaries and the decrease in maternity and parental benefits when the Quebec Parental Insurance Plan (QPIP) is fully implemented.
- Premium revenue is expected to decrease to \$16.6 billion, as the reduction in premium rates to 1.87% in 2006 offset the rising employment and earnings. The decrease in premium revenue includes a full year's premium reduction under QPIP.

The following chart summarizes trends in total costs and revenues of the EI Account from 1994-1995 to 2006-2007.

EI Account – Cost and Revenues Trend

The table below summarizes the financial results for the EI Account from 2003-2004 to 2006-2007.

EI Account – Summary

(millions of dollars)	Actual		Forecast	Planned Spending
	2003-2004	2004-2005	2005-2006	2006-2007
Expenditures				
Benefits	15,070	14,748	14,418	14,580
Administrative Costs	1,521	1,542	1,638	1,624
Doubtful Accounts	60	95	56	57
Total Costs	16,651	16,385	16,112	16,261
Revenues				
Premium Revenue	17,900	17,655	16,917	16,621
Penalties	47	51	50	54
Interest	1,125	995	1,352	1,968
Total Revenues	19,072	18,701	18,319	18,643
Surplus				
Current Year	2,421	2,316	2,207	2,382
Cumulative	46,233	48,549	50,756	53,139

Notes:

The EI premiums reported in the summary financial statements of the Government of Canada exclude the premium contributions made by the Government of Canada as an employer.

Totals may not add due to rounding.

Benefit Payments

Benefits in 2006-2007 are expected to reach \$14.6 billion, consisting of \$12.4 billion for Income Benefits and \$2.1 billion for Employment Benefits and Support Measures.

Income Benefits

EI Income Benefits include regular, special, work-sharing and fishers' benefits.²⁵ Major aspects of these benefits are as follows:

Regular Benefits

Amount of Work Required to Qualify for Benefits

Most claimants require 420 to 700 hours of work during their qualifying period, regardless of whether from full-time or part-time work, or whether the work is with one employer or several. The exact number of hours required is called the "variable entrance requirement". It is determined by the rate of unemployment in a claimant's region at the time he or she applies for benefits. In general, the higher the rate of unemployment, the fewer hours of work required to qualify.

People who have just entered the labour market ("new entrants") and those returning to the labour force after an absence ("re-entrants") require 910 hours of work. However, if they worked at least 490 hours in the preceding 12 months, or received at least one week of maternity or parental benefits in the four years before that, they will be eligible under normal rules the following year.

Determining the Benefit Rate and Entitlement

Claimants for regular benefits may receive benefits for 14 to 45 weeks, depending upon their hours of insurable employment and the regional unemployment rate.

Claimants' weekly benefits are 55% of their average insurable earnings during the last 26 weeks. The average insurable earnings are based on the actual weeks of work, subject to a minimum divisor that is tied to the regional rate of unemployment.

Claimants with a combined family income of less than \$25,921 and who qualify for the Canada Child Tax Benefit (CCTB) receive a Family Supplement based upon:

- the net family income
- the number of dependent children
- the ages of those dependent children

The benefit rate for claimants who receive a Family Supplement can be increased to a maximum of 80% of the claimant's average weekly insurable earnings, up to the maximum weekly benefit of \$413.

Pilot Projects

The Extended EI Benefits Pilot project increases regular benefit entitlement up to 5 additional weeks in high unemployment regions, to a maximum entitlement of 45 weeks of benefits, for claims established in the period beginning on June 11, 2006 and ending in the week of December 9, 2007. This replaces a previous pilot project in high unemployment regions which also provided five additional weeks of benefits for claims established in the period beginning on June 6, 2004 and ending in the week of June 4, 2006. This is an interim measure and the Government's priority continues to be to help Canadians participate in the labour market.

²⁵ For more details refer to the EI website at <http://www.hrsdc.gc.ca/en/gateways/topics/tyt-qxr.shtml>

Three pilot projects have been implemented in regions of high unemployment (10 percent or higher). Effective October 30, 2005, in affected regions, EI benefits will be calculated based on the "best 14 weeks" of earnings over the 52 weeks preceding a claim for benefits. Effective December 11, 2005, individuals new to the labour market or returning after an extended absence can qualify for EI regular benefits with a minimum of 840 hours worked (rather than 910), and the working-while-on-claim threshold for calculating benefits will be increased to \$75 or 40% of weekly benefits (up from \$50 or 25% of weekly benefits).

Special Benefits

Claims for sickness, maternity, parental, or compassionate care benefits require 600 hours of work, and are not affected by the new entrant/re-entrant rule. All claimants may receive sickness benefits for up to 15 weeks. Parental benefits of 35 weeks are available for biological and adoptive parents in addition to the 15 weeks of maternity benefits available to biological mothers. Compassionate care benefits of 6 weeks are available for those providing care for a gravely ill or dying family member (a sibling, grandparent, grandchild, in-law, aunt, uncle, niece, nephew, foster parent, ward, guardian, or a gravely ill person who considers the claimant to be like a family member).

On March 1, 2005 the Government of Canada and the Government of Quebec signed the final agreement on Quebec Parental Insurance Plan. Effective January 2006, Quebec residents will claim maternity and parental benefits from the Quebec provincial government. All benefits paid by the federal government for maternity and parental benefits in Quebec for claims established before 2006 but paid after January 2006 will be reimbursed by the Quebec government.

Work Sharing

Claimants may receive benefits while on work-sharing agreements. These agreements between HRSDC, employees and employers attempt to avoid temporary layoffs by combining partial EI benefits with reduced workweeks. They normally last from 6 to 26 weeks.

Fishers' Benefits

Fisher claims have duration and benefit rates that depend on the earnings from fishing and the regional rate of unemployment. All fisher claims have a 31-week maximum qualifying period and a maximum entitlement of 26 weeks of benefits. These can be claimed from October 1st to June 15th for summer fishers' benefits and April 1st to December 15th for winter fishers' benefits. Fishers can file claims for both seasons. Benefit rates for fisher claims are determined by a minimum divisor that depends on the regional rate of unemployment.

Benefit Repayments

When the net annual income of EI claimants exceeds 1.25 times the maximum yearly insurable earnings ("the repayment threshold"), they have to repay the lesser of 30% ("the repayment rate") of the net excess income or 30% of the amount of total benefits other than special benefits paid. In addition, first-time claimants of regular or fishing benefits are exempt from benefit repayment.

EI Income Benefits – Expenditures

(millions of dollars)	Actual		Forecast	Planned Spending
	2003-2004	2004-2005	2005-2006	2006-2007
Income Benefits				
Regular	9,122	8,669	8,411	8,832
Sickness	754	797	835	870
Maternity	909	925	903	765
Parental	2,015	2,112	2,064	1,760
Compassionate Care	2	7	8	10
Fishing	337	313	285	310
Work Sharing	27	11	13	20
Benefit Repayments	(114)	(153)	(117)	(125)
Total Income Benefits	13,052	12,681	12,402	12,442

Note: Totals may not add due to rounding.

Factors Affecting Income Benefit

	Actual		Forecast	Planned Spending	%
	2003-2004	2004-2005	2005-2006	2006-2007	Change
Income Benefits (\$ million)	13,052	12,681	12,402	12,442	0.3%
Average Monthly Beneficiaries (000's)	848	819	788	764	(3.0%)
Benefit Rate (\$/week)	295	299	302	312	3.4%

Employment Benefits and Support Measures

The **Employment Benefits** include Skills Development, Job Creation Partnerships, Self-Employment and Targeted Wage Subsidies.

The **Support Measures** include Employment Assistance Services, Labour Market Partnerships and Research and Innovation.

Part II of the *EI Act* also authorizes the federal government to make payments to the governments of the provinces and territories for implementing programs similar to Employment Benefits and Support Measures. The planned federal contribution to provinces and territories (i.e., New Brunswick, Quebec, Ontario, Manitoba, Saskatchewan, Alberta, Northwest Territories and Nunavut) under Labour Market Development Agreements is \$889 million for 2006-2007. This \$889 million does not reflect the amount to be transferred to Ontario in 2006-2007, as the transfer and its associated administrative costs are being negotiated for implementation on January 1, 2007.

The total planned spending for Employment Benefits and Support Measures in 2006-2007 is set at \$2,138 million or 0.5% of the total estimated insurable earnings of \$401,239 million. This is below the 0.8% ceiling set under Section 78 of the *EI Act*.

Employment Benefits and Support Measures				
(millions of dollars)	Actual		Forecast	Planned Spending ^a
	2003-2004	2004-2005	2005-2006	2006-2007
Job Creation Partnerships	74	71	54	
Skills Development	355	429	410	
Self-Employment	96	115	107	
Targeted Wage Subsidies	45	48	42	
Employment Assistance	334	324	322	
Labour Market Partnerships	192	173	177	
Research & Innovation	27	17	15	
Total HRSDC Programs	1,124	1,176	1,127	1,249
Transfers to Provinces and Territories	894	891	889	889
Total	2,018	2,067	2,016	2,138

a. Breakdown by component is not available, as spending will be guided by local labour market needs. Breakdown by provinces/territories is provided in the EI Part II – 2006-2007 Expenditure Plan.

Note:

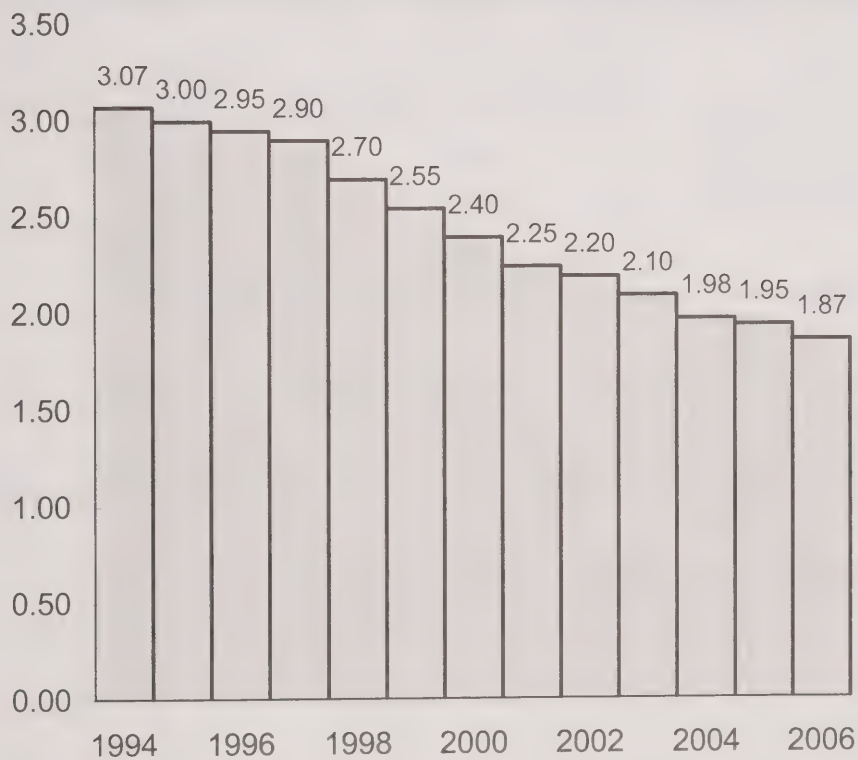
Totals may not add due to rounding.

Premiums

Premiums are collected from insured employees and their employers to cover the program costs over a business cycle, based on a yearly premium rate and employees' insurable earnings. The factors affecting the premiums are further explained below:

Premium Rate: Through Budget 2005, the Government of Canada introduced a new permanent rate-setting mechanism and gave the EI Commission the legislative authority to set the EI premium rate. Under the new rate-setting process, the Chief Actuary is required to annually calculate, on a forward-looking basis, the estimated break-even rate for the coming year based on the most current forecast values of the relevant economic variables provided by the Minister of Finance. The forward-looking basis means that surpluses, deficits, and the notional interest credited to the EI Account do not enter into the calculation of the "break-even" premium rate. For 2006, the Commission set the employee rate at 1.87% of insurable earnings, which is a reduction from 2005 rate of 1.95%. The corresponding employer rate will be 2.62%, a reduction from its current level of 2.73%. The 2006 EI rate represents the twelfth consecutive rate reduction since 1994, when the employee rate was 3.07%

Employee Premium Rate Trend (% of Insurable Earnings)



Maximum Yearly Insurable Earnings (MYIE): Premiums are paid on all employment earnings of insured employees up to the MYIE. Section 4 of the *EI Act* provides that the MYIE will be \$39,000 until the value of the twelve month weekly average earnings ending in June of the first preceding year times the ratio of the same average to the corresponding average for the second preceding year times 52 and rounded down to the nearest \$100 exceeds that threshold.²⁶

Premium Reduction: Employers with qualified wage-loss insurance plans are entitled to premium reductions. They are required to share this reduction with their employees.²⁷

Additionally, with the implementation of QPIP, the premium rate for employees in Quebec will be reduced to 1.53% in 2006 and the corresponding rate for employers is 2.14%. It is estimated that in 2006 the amount of premiums collected in Quebec will be \$794 million less.

Premium Refund:

- Workers with annual earnings of \$2,000 or less can receive a refund of their EI premiums through the income tax system.

EI premiums are refunded to employees when their insurable earnings are in excess of the maximum yearly insurable earnings.

Factors Affecting Premium Revenue					
	Actual		Forecast	Planned Spending	%
(millions of dollars)	2003-2004	2004-2005	2005-2006	2006-2007	Change
Fiscal Year Factors					
Premium Revenue (\$ million)	17,900	17,655	16,917	16,621	(1.7%)
Total Insurable Earnings (\$ million)	372,373	384,426	393,479	401,239	2.0%
	2003	2004	2005	2006	
Calendar Year Factors					
Employee Premium Rate ^a					
(% of insurable earnings)	2.10%	1.98%	1.95%	1.87%	(4.1%)
Maximum Insurable Earnings (\$)	39,000	39,000	39,000	39,000	
Premium Reduction (\$ million)	(522)	(549)	(566)	(586)	
Régime québécois d'assurance parentale				(797)	
Premium Refunds (\$ million)					
Employee	(170)	(178)	(170)	(164)	
Employer (New Hires/Youth Hires)	(19)				

a. The employers' portion is 1.4 times the employee rate.

²⁶ For further information, see http://www.hrsdc.gc.ca/en/ei/legislation/ei_act_maxyear.shtml#Maximum%20for

²⁷ For further information, see http://www.hrsdc.gc.ca/en/ei/legislation/ei_act_part3.shtml#69

Interest Earned

Section 76 of the *EI Act* stipulates that the Minister of Finance may authorize the payment of interest on the balance in the Employment Insurance Account in accordance with such terms and conditions and at such rates as the Minister of Finance may establish, and the interest, which is currently set at 90% of the three-month Treasury bill rate, shall be credited to the Employment Insurance Account and charged to the Consolidated Revenue Fund. Interest is calculated monthly, based on the 30-day average of the daily balance in the Account.

Interest is charged on overdue accounts receivable, caused through misrepresentation, in accordance with Treasury Board regulations. The interest rate used in this calculation is the average Bank of Canada discount rate for the previous month plus 3.0%.

Interest Earned				
(millions of dollars)	Actual		Forecast	Planned Spending
	2003-2004	2004-2005	2005-2006	2006-2007
Sources				
Account Balance	1,096	968	1,324	1,934
Accounts Receivable	29	27	28	34
Total	1,125	995	1,352	1,968

Interest earned is expected to reach \$2.0 billion due to the increase in the interest rates as well as a higher cumulative surplus.

Administrative Costs

Section 77 of the *EI Act* specifies that the costs of administering the Act are to be charged to the EI Account.

The Minister of Human Resources and Social Development is responsible for reporting on the EI Program to Parliament. However, the Canada Customs and Revenue Agency (CCRA), which collects premiums and benefits repayments and provides decisions on insurability under the Act, shares the administration of the Program. The Treasury Board Secretariat and the Department of Justice all supply services that support management and delivery of programs under the *EI Act*.

The administrative costs that provincial and territorial governments incur to administer Employment Benefits and Support Measures under the Labour Market Development Agreements are also charged to the EI Account.

Administrative Costs				
	Actual		Forecast	Planned Spending
(millions of dollars)	2003-2004	2004-2005	2005-2006	2006-2007
Federal				
EI Income Benefits	540	573		
Policy, Program and Service Delivery	527	458		
Corporate Services	272	295		
Employment Programs	36	57		
Workplace Skills Learning	44	59		
Learning	17	16		
Subtotal	1,436	1,458	1,553	1,532
Provincial	92	92	92	100
Recovery	(6)	(8)	(7)	(8)
Total	1,521	1,542	1,638	1,624

Note:

Totals may not add due to rounding.

The \$1,624 million EI administrative costs are the initial approved resources for 2006-2007, which is slightly less than the final spending authority for 2005-2006.

Canada Pension Plan

Description

The Canada Pension Plan (CPP) is a contributory, earnings-related social insurance program. It is a joint federal-provincial plan that operates throughout Canada, except in Quebec, which has its own comparable plan. The CPP provides for a variety of benefits based on life changes. Best known for its retirement pensions, the CPP also provides benefits for surviving partners and children of CPP contributors, people with disabilities and their children, and a one-time maximum benefit of up to \$2,500 in the event of the death of a contributor.

As a contributory plan, contributors are employees or self-employed persons generally between the ages of 18 and 70, who earn at least a minimum amount (\$3,500) during a calendar year. Benefits are calculated based on how much and for how long a contributor has paid into the CPP. Benefits are not paid automatically—everyone must apply and provide proof of eligibility.

Approximately 12 million Canadians over the age of 18 currently contribute annually to the Plan and approximately 4 million Canadians will receive benefits during 2006-2007.

Benefit Payments

Retirement Pensions: Contributors may begin receiving CPP retirement pensions as early as age 60 or delay receipt until age 70. Applicants who are between 60 and 65 must have stopped working or earn below a specified level when they begin to receive the retirement pension. Once that person starts receiving the CPP pension, he/she can earn any amount without affecting the CPP pension. However, contributions are not made to the CPP on any future earnings. Contributors over age 65 need not have stopped working to qualify.

The amount of each contributor's pension depends on how much and for how long he/she has contributed and at what age he/she begins to draw the benefits. Pensions are adjusted by 0.5 percent for each month before or after age 65 from the time a person begins to receive his/her pension. Contributors who begin receiving a retirement pension at age 60 will receive 70% of the amount that would otherwise be payable at age 65, while those who delay receiving a pension until age 70 will receive 130% of the amount payable at age 65.

Spouses and common-law partners who are at least 60 years of age can share their retirement benefits earned during the period of cohabitation as long as they remain together. This may result in tax savings. If only one spouse is a CPP contributor, the pension can be shared between the two spouses. The overall benefits paid do not increase or decrease with pension sharing.

Disability Benefits: Disability benefits are payable to contributors who meet the minimum contributory requirements and whose disability is "severe and prolonged", as defined in the legislation. Such a disability would prevent them from working regularly at any job in a substantially gainful manner for a prolonged period of time. In order to ensure that benefits are only paid to eligible beneficiaries, periodic reassessments are carried out. Support is also provided to clients who try to return to regular gainful employment. Children of CPP disability beneficiaries are also eligible for a flat rate monthly benefit up to the age of 18, or up to age 25 if attending school full-time. As of February 2006, there were just over 299,000 beneficiaries and 88,000 children receiving monthly benefits.

Survivor's Benefits: A contributor's surviving spouse/common-law partner may be eligible for a monthly benefit if the contributor has contributed for a minimum period and, if at the time of the contributor's death, the spouse/common-law partner was at least 35 years old or was under age 35 and either had dependent children or was disabled. Payments continue in the event that the surviving spouse/common-law partner remarries. Monthly benefits are also payable on behalf of the children of CPP contributors who die. The amount is a flat rate and is payable until the child reaches age 18, or up to age 25 if he or she attends school full-time. A lump-sum benefit is also available to the estate of the deceased contributor provided the minimum contributory requirements have been met.

Determining the Benefit Rate

CPP benefits are largely related to earnings. Benefits are adjusted in January of each year to reflect increases in the average cost of living, as measured by the Consumer Price Index. Benefits such as children's benefits are not based on earnings; they are a fixed amount. Disability and survivor benefits contain a fixed-rate or flat rate portion in addition to an earnings-related portion.

CPP Benefit Payments by Category and Type				
	Actual		Forecast	Planned Spending
(millions of dollars)	2003-2004	2004-2005	2005-2006	2006-2007
Retirement pensions	15,852	16,795	17,664	18,601
Disability benefits				
Disability pensions	2,844	2,921	3,105	3,203
Benefits to children of disabled contributors	257	257	268	273
Disability benefits total	3,101	3,178	3,373	3,476
Survivor benefits				
Surviving spouse or common law partner's benefits	3,187	3,327	3,459	3,565
Orphans' benefits	213	215	218	223
Death benefits	254	248	263	267
Survivor benefits total	3,654	3,790	3,940	4,055
TOTAL	22,607	23,763	24,977	26,132

Administrative Costs

Human Resources and Social Development Canada, Finance Canada, the Canada Revenue Agency, Public Works and Government Services Canada, the Royal Canadian Mounted Police and the Office of the Superintendent of Financial Institutions supply services that support the management and delivery of the CPP and its funds.

Costs incurred by these departments and agencies in administering the Plan are recoverable from the Account based on the costing principles approved by Treasury Board. Essentially, those principles are that costs must be incurred because of CPP responsibilities and must be traceable. Administrative expenses for 2006-2007 are estimated at \$397.8 million, representing a decrease of 2.5% from the forecast for 2005-2006.

Benefits delivery staff and processes are extremely efficient in getting benefits into the hands of CPP contributors. In 2006-2007, the total cost for administering and delivering CPP benefits is approximately 1.5% of the total forecasted benefit payments.

CPP Administrative Expenses by Department

(millions of dollars)	Actual		Forecast	Planned Spending
	2003-2004	2004-2005	2005-2006	2006-2007
Human Resources Development Canada				
Plan administration, operations, records, and accommodation	266.4	-		
Social Development Canada				
Plan administration, operations, records, and accommodation		224.0	240.5	232.0
Human Resources and Skills Development Canada				
In-person services for applicants and beneficiaries		6.6	15.3	14.7
EI Account - Refunding of EI Account in relation to assignment of Social Insurance numbers and maintenance of the central index	1.7	2.7	3.3	3.0
Treasury Board Secretariat				
Insurance premiums and recoverable contributions to the Employee Benefit Plan	40.8	39.0	30.1	27.8
Public Works and Government Services				
Cheque issue, EDP services	14.7	15.8	16.1	16.2
Royal Canadian Mounted Police				
Investigation of contraventions			0.3	0.3
Canada Revenue Agency				
Collection of contributions	85.3	96.5	100.8	101.7
Office of the Superintendent of Financial Institutions				
Actuarial services	1.0	1.3	1.4	1.7
Finance				
Investment services	0.4	0.4	0.4	0.4
TOTAL	410.3	386.4	408.3	397.8

Revenues

The CPP is financed through mandatory contributions from employees, employers and self-employed persons, as well as from investment income. Contributions are paid on the portion of a person's earnings that falls between a specified minimum (the Year's Basic Exemption) and maximum (the Year's Maximum Pensionable Earnings) amounts. The minimum remains constant at \$3,500, while the maximum amount is linked to the average Canadian industrial wage and is adjusted annually. No contributions are made once a contributor begins to receive a CPP retirement pension, while receiving a disability pension or reaches the age of 70. Disbursements include the payment of CPP benefits and administrative expenditures associated with managing the program.

When it was introduced in 1966, the CPP was designed as a pay-as-you-go plan, with a small reserve. This meant that the benefits for one generation would be paid largely from the contributions of later generations. However, demographic and economic developments and changes to benefits in the 30 years that followed resulted in significantly higher costs. It became clear that to continue to finance the program on a pay-as-you-go basis would have meant imposing a high financial burden on Canadians in the work force during those years. Plan administrators chose instead to change the funding approach of the Plan to a hybrid of pay-as-you-go and full-funding.

In 1998, the federal and provincial governments introduced “steady-state” financing. Under steady-state financing, the contribution rate was increased incrementally, from 5.6% in 1996, to 9.9% in 2003, and remains at that rate. The Office of the Superintendent of Financial Institutions' 21st Actuarial Report on the sustainability of the Canada Pension Plan states that the actual steady-state contribution rate is 9.8% of contributory earnings. This rate represents the lowest rate sufficient to sustain the Plan without further increase and is 0.1% lower than the legislated 9.9% contribution rate. With the 9.9% legislated contribution rate, the assets are expected to increase significantly over the next 17 years, with the ratio of assets to the following year's expenditures growing from 3.1 in 2004 to 5.6 by 2021.²⁸

This approach will generate a level of contributions between 2001 and 2020 that exceeds the benefits paid out every year during that period. Funds not immediately required to pay benefits are transferred to the CPP Investment Board for investment in financial markets. Over time, this will create a large enough reserve to help pay the costs that are expected as more and more baby-boomers retire.

Adoption of this diversified funding approach has made the Canadian retirement income system less vulnerable to changes in economic and demographic conditions and a leading edge example of public pension plan management in the world.

Investment Income: Income is earned on the investments in equities, real estate and money market securities as well as interest earned by bonds.

Financial Accountability

The CPP and its resources are divided among three components:

- The **CPP Account** was established to record the contributions, interest, pensions and benefits and administrative expenditures of the Plan. In September 2004, the Operating Reserve²⁹ in the CPP Account began to be transferred to the CPP Investment Board and was completed in August 2005. As well, the CPP Investment Board receives weekly forecasts generated by the CPP Accounting personnel and any excess funds not needed to pay for CPP benefits and expenses.
- The **CPP Investment Fund** was established to record investments in the securities of the provinces, territories and Canada. Following the adoption of Bill C-3 in April 2004, the CPP Investment Fund will gradually be transferred to the CPP Investment Board over a period of 3 years. The transfer of the CPP Investment Fund started May 1, 2004.
- The **Canada Pension Plan Investment Board** is an arm's length Crown Corporation established by an Act of Parliament in December 1997. It began operations in March 1999 to help the CPP achieve steady-state funding by investing funds not required by the CPP to pay current pensions and earning investment returns on funds transferred from the CPP Account.³⁰ The Board is accountable to the public and governments through regular reports. It is subject to broadly the same investment rules as other pension funds in Canada.

²⁸ Office of the Chief Actuary. *Actuarial Report (21st) on the Canada Pension Plan as at 31 December 2003*. Ottawa: Office of the Superintendent of Financial Institutions Canada. 2004. p. 10.

²⁹ The reserve is made up of an amount equivalent to 3 months worth of CPP benefits and expenses.

³⁰ Information about the Canada Pension Plan Investment Board can be found at <<http://www.cppib.ca>>.

Financial Summary

Benefit payments are expected to reach \$26.1 billion in 2006-2007, an increase of \$1.2 billion or 4.6% over 2005-2006. This increase reflects forecasts of client population and average benefit payments. In 2006-2007, it is expected that there will be a net increase in client population of 3.0% and a net increase in average benefit payments of 1.7%.

The table below summarizes the financial results for the CPP from 2003-2004 to 2006-2007. In 2002-2003, the Government of Canada changed its basis of accounting from the modified accrual accounting to the full accrual basis of accounting. This change in accounting policy has been applied retroactively and the financial statements have been restated accordingly.

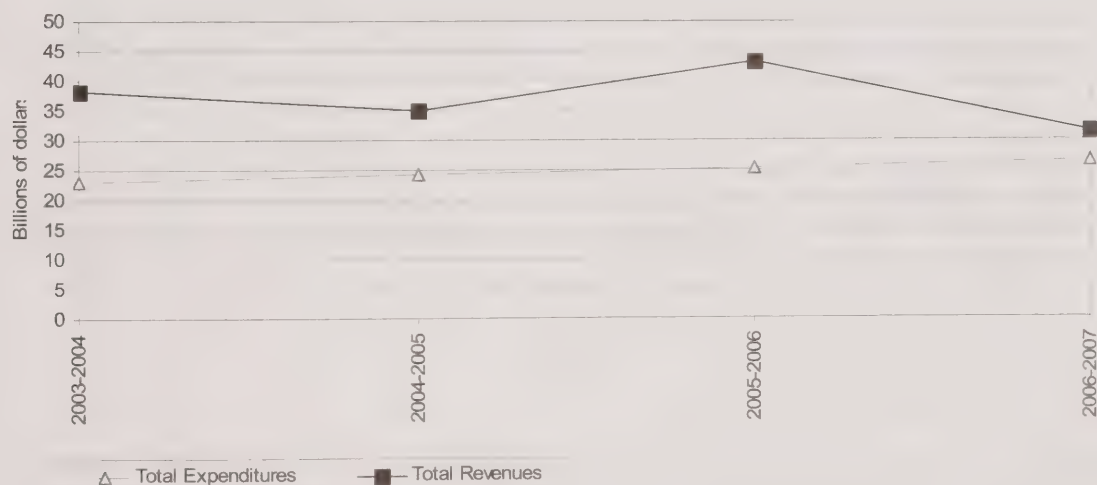
As well, the evaluation of the provincial, territorial and federal bonds was changed from cost to fair value during 2003-2004. The change in accounting policy has been applied retroactively and the financial statements have been restated to reflect this.

The CPP is expected to have an increase of almost \$18 billion, bringing the cumulative balance to more than \$106 billion by March 31, 2007. At present, the CPP has a fund equal to over 3.5 times the benefits and this is expected to grow to about 5.6 times by 2021.

The following figures summarize trends in total revenues and expenditures of the Account and its status from 2003-2004 to 2006-2007.

Trends in total revenues and expenditures of the Account and its status from 2003-2004 to 2006-2007.

	2003-2004	2004-2005	2005-2006	2006-2007
Total Expenditures	23.0	24.1	25.4	26.5
Total Revenues	38.3	35.0	43.3	31.5



CPP Summary

	Actual		Forecast	Planned Spending
(millions of dollars)	2003-2004	2004-2005	2005-2006	2006-2007
Revenue				
Contributions	28,029	28,941	30,305	30,972
Investment Income				
Canada Pension Plan	2,682	2,070	1,093	514
CPP Investment Board ¹	7,209	4,983	12,139	N/A
CPP Investment Fund ²	357	(945)	(254)	N/A
Total Investment Income	10,248	6,108	12,978	514
Total Revenue	38,277	35,049	43,283	31,486
Expenditures				
Benefit payments	22,607	23,763	24,977	26,132
Administrative expenses	410	386	408	398
Total Expenditures	23,017	24,149	25,385	26,530
Increase	15,260	10,900	17,898	4,955
Year-end balances	72,511	83,411	101,309	106,264

¹ Canada Pension Plan Investment Board actual amounts are based on their audited financial statements. The CPP Investment Board invests mainly in equities. The investment income is determined mainly by the change in fair values of these investments. It is difficult to forecast a future fair value therefore the investment income for the year 2006-2007 is not yet available.

² The Canada Pension Plan Investment Fund is made up of provincial, territorial and government bonds. Since March 31, 2004, these are valued at fair value. The revenue of the Fund is made up of the interest from the bonds as well as the change in fair values of these investments. The interest income from the Investment Fund is presented under "Canada Pension Plan" of this section. It is difficult to forecast a future fair value therefore the investment income for the year 2006-2007 is not yet available.

Long-term Forecast

The CPP legislation requires a schedule of contribution rates with a review every three years by the federal and provincial finance ministers. The review determines whether any adjustments to the schedule are necessary. If so, the adjustments are implemented through legislation or agreement among finance ministers, or automatically under a formula that ensures that the contribution rate will be sufficient to sustain the Plan in the face of an aging population. Amendments to the rate schedule or the automatic regulation require the approval of at least two thirds of the provinces with at least two thirds of the population of all the provinces.

The following table shows the forecast of revenues and expenditures affecting the CPP for the period between December 31, 2005 and December 31, 2030, based on the Office of the Superintendent of Financial Institutions' Actuarial Report (21st) on the Canada Pension Plan as at December 31, 2003. The Assets/Expenditures Ratio reflects the size of the year-end assets relative to the expenditures.

Forecast of Revenues and Expenditures

Year	Contribution	Contributions	Investment		Assets at Dec. 31	Assets/ Expenditure ratio
	Rate %		Earnings	Expenditures		
			\$ millions			
2010	9.90	36,128	8,982	31,868	146,795	4.37
2015	9.90	45,579	14,635	42,022	226,815	5.09
2020	9.90	57,537	21,497	56,253	332,116	5.57
2025	9.90	71,145	29,177	74,887	454,613	5.75
2030	9.90	88,011	37,958	97,015	591,404	5.81

Source: 21st Actuarial Report from the Office of the Superintendent of Financial Institutions Canada

Government Annuities Account

This account was established by the *Government Annuities Act*, and modified by the *Government Annuities Improvement Act*, which discontinued sales of annuities in 1975. The account is valued on an actuarial basis each year, with the deficit charged or surplus credited to the Consolidated Revenue Fund.

The purpose of the *Government Annuities Act* was to assist Canadians to provide for their later years, by the purchase of Government annuities. The *Government Annuities Improvement Act* increased the rate of return and flexibility of Government annuity contracts.

Income consists of premiums received, funds reclaimed from the Consolidated Revenue Fund for previously untraceable annuitants, earned interest and any transfer needed to cover the actuarial deficit. Payments and other charges represent matured annuities, the commuted value of death benefits, premium refunds and withdrawals, and actuarial surpluses and unclaimed items transferred to non-tax revenues. The amounts of unclaimed annuities, related to untraceable annuitants, are transferred to non-tax revenues.

As of March 31, 2006, there were 2,400 outstanding deferred annuities, the last of which will come into payment around 2030.

Government Annuities Account – Receipts and Disbursements				
	Actual			Planned
(millions of dollars)	2003-2004	2004-2005	2005-2006	Spending
				2006-2007
Expenditures				
Actuarial Liabilities –				
Balance at beginning of year	437.6	405.8	377.2	347.2
Income	28.5	26.3	24.5	24.3
Payments and other charges	57.8	54.6	51.0	47.9
Excess of Payments and other charges				
over income for the year	29.3	28.3	26.5	23.6
Actuarial Surplus	2.5	0.3	3.5	1.6
Actuarial Liabilities –				
Balance at year-end	405.8	377.2	347.2	321.9

Civil Service Insurance Fund

This account was established by the *Civil Service Insurance Act*, under which the Minister of Finance could contract with permanent employees in the public service for the payment of certain death benefits. No new contracts have been entered into since 1954 when the Supplementary Death Benefit Plan for the Public Service and Canadian Forces was introduced as part of the *Public Service Superannuation Act* and the *Canadian Forces Superannuation Act*, respectively. As of April 1997, the Department of Human Resources Development assumed the responsibility for the administration and the actuarial valuation of the *Civil Service Insurance Act*.

The number of policies in force as of March 31, 2006 was 1,424 and the average age of the policy holders was 87.0 years. Receipts and other credits consist of premiums and an amount (charged to expenditures) which is transferred from the Consolidated Revenue Fund in order to balance the assets and actuarial liabilities of the program. Payments and other charges consist of death benefits, settlement annuities paid to beneficiaries and premium refunds.

Pursuant to subsection 16(3) of the *Civil Service Insurance Regulations*, any deficit will be credited to the Account from the Consolidated Revenue Fund.

Civil Service Insurance Fund – Receipts and Disbursements				
	Actual			Planned
(millions of dollars)	2003-2004	2004-2005	2005-2006	Spending
				2006-2007
Revenue				
Opening Balance	7.5	7.1	6.6	6.3
Receipts and other credits	0.2	0.0	0.1	0.1
Payments and other charges	0.6	0.5	0.4	0.4
Excess of payments and other charges over income for the year	0.4	0.5	0.3	0.3
Closing Balance	7.1	6.6	6.3	6.0

Employment Insurance Part II – 2006-2007 Expenditure Plan

Background

Part II of the *Employment Insurance Act (EI Act)* commits the federal government to work in concert with provinces and territories in designing and implementing active employment programs that would be more effective in helping unemployed Canadians integrate into the labour market. These programs are called Employment Benefits and Support Measures (EBSM).

In accordance with the Government of Canada's 1996 offer to provinces and territories to enter into bilateral partnerships on labour market activities, Labour Market Development Agreements (LMDAs) have been concluded with all provinces and territories. Most recently, in November of 2005, the Government of Canada entered into a LMDA with the Government of Ontario; it will come into effect on January 1st, 2007.

The LMDAs involve two types of arrangements:

- Co-management agreements where Human Resources and Skills Development Canada (HRSDC), formerly Human Resources Development Canada, and the province or territory jointly assume responsibility for the planning and design of EBSM, while HRSDC, through Service Canada continues to deliver programs and services through its service delivery network. Such agreements have been concluded with Newfoundland and Labrador, Prince Edward Island, British Columbia and the Yukon. There is also a strategic partnership agreement that is a variation of co-management in Nova Scotia.
- Transfer agreements where the province or territory assumes responsibility for the design and delivery of active employment programs similar to EBSM. Such agreements have been concluded with New Brunswick, Quebec, Manitoba, Saskatchewan, Alberta, the Northwest Territories and Nunavut.
- HRSDC, through Service Canada, delivers EBSM in Ontario until the Canada-Ontario transfer LMDA comes into effect, on January 1st, 2007.

In addition to locally and regionally delivered EBSM and similar programs, pan-Canadian activities that are national or multi-regional in scope or purpose are delivered by HRSDC. Pan-Canadian activities also include programming similar to EBSM delivered by Aboriginal organizations under Aboriginal Human Resources Development Agreements.

Employment Benefits and Support Measures

The five employment benefits are:

- **Targeted Wage Subsidies** to encourage employers to hire individuals who they would not normally hire in the absence of a subsidy.
- **Self-Employment** to help individuals to create jobs for themselves by starting a business.
- **Job Creation Partnerships** to provide individuals with opportunities through which they can gain work experience which leads to on-going employment.
- **Skills Development** to help individuals to obtain skills for employment, ranging from basic to advanced skills through direct assistance to individuals, and, where applicable, contributions to provinces/territories or provincially/territorially funded training institutions to cover costs not included in tuition fees.

- **Targeted Earnings Supplements** to encourage individuals to accept employment by offering them financial incentives.

It should be noted that of the employment benefits listed above, Targeted Earnings Supplements has not yet been implemented.

Eligibility to receive assistance under the employment benefits extends to persons who are insured participants as defined in Section 58 of the *EI Act* i.e., active claimants and former claimants (individuals who have had an EI claim that ended in the past three years or those who received maternity or parental benefits in the past five years, after which they left the labour market to care for their children).

Part II of the legislation also authorizes the establishment of support measures in support of the National Employment Service. The three measures are:

- Employment Assistance Services to assist organizations in the provision of employment services to unemployed persons.
- Labour Market Partnerships to encourage and support employers, employee and/or employer associations and communities to improve their capacity for dealing with human resource requirements and implementing labour force adjustments.
- Research and Innovation to support activities which identify better ways of helping persons prepare for or keep employment and be productive participants in the labour force.

Financial Data

2006-2007 Employment Insurance Plan			
(millions of dollars)	Base	Re-Investment	Total Plan
Newfoundland and Labrador	58.8	73.1	131.9
Nova Scotia	50.7	30.3	81.0
New Brunswick	50.2	42.1	92.3
Prince Edward Island	16.4	10.0	26.5
Quebec	347.7	248.1	595.8
Ontario	342.6	184.1	526.7
Manitoba	36.8	10.2	47.0
Saskatchewan	29.1	9.9	39.0
Alberta	72.9	35.9	108.9
Northwest Territories	1.9	1.6	3.4
Nunavut	1.8	1.0	2.8
British Columbia	139.1	151.7	290.9
Yukon	1.9	2.0	3.9
	1,150.0	800.0	1,950.0
Pan-Canadian Responsibilities ^a	187.9	0.0	187.9
Funds available for Employment Benefits and Support Measures	1,337.9	800.0	2,137.9

- a. Funds earmarked for Pan-Canadian priorities, such as Aboriginal programming, sectoral and innovations projects. The amount is net of \$12.8 million funds permanently converted to operating costs and of resources identified in the Plan as part of Government Wide Reallocation exercise.

Note:

Totals may not add due to rounding.

For 2006-2007, the EI Part II expenditure authority of \$2,165.6 million represents 0.54% of total estimated insurable earnings of \$401.239 billion. This represents a lower level of expenditures than the 0.8% ceiling imposed under the Act, which is estimated at \$3.21 billion in 2006-2007.

Some of the savings from Part I income benefits generated by the EI reform are included in these funds to provide job opportunities and help Canadians get back to work more quickly. The amount of re-investment reached maturity at \$800 million in 2000-2001.

Expected Results

An accountability framework has been developed that respects the legal responsibility of the Minister of Human Resources and Social Development for the EI Account. Key indicators will measure both the short and long term outcomes of EBSM.

It is expected that 425,000 active and former claimants will be assisted in 2006-2007. These estimates may change, depending on labour market conditions and agreements achieved with provinces and territories.

EBSM (EI Part II Activities)¹			
	Clients Employed/ Self-Employed	Unpaid Benefits	Active Claimants Served
Targeted Results 2004-2005 ²	231,234	\$863.0M	442,549
Actual Results 2004-2005	214,220	\$855.2M ³	425,033 ⁴
Targeted Results 2005-2006 ⁵	223,831	\$863.6M	407,472
Expected Results 2006-2007	217,000 ⁶	\$850.0M	425,000 ⁷

- 1 Exclusive of Employment Information Services. This table includes Aboriginal pan-Canadian EBSM numbers which were not reported in this annex of the EI Expenditure Plan (Part II) for 2005-2006.
- 2 The targeted results for Clients Employed and Unpaid Benefits for 2004-2005 and 2005-2006 are the totals as submitted by the regions, provinces and territories. "Clients served" includes Active EI claimants from all regions/provinces/territories, plus Former EI claimants from Quebec. The Quebec agreement requires that the province report on Active and Former EI claimants, as "Clients served."
- 3 Represents one count of unpaid benefits per client, to avoid the double counting of unpaid benefits of clients who participated in both Regular and Aboriginal pan-Canadian EBSM.
- 4 The Regular EBSM clients served (409,960) includes Active EI claimants from all regions, plus Former claimants from Quebec. The Quebec agreement requires that the province report on Active and Former EI claimants, as "Clients served." It also includes 15,073 Aboriginal pan-Canadian EBSM clients served.
- 5 Targeted Results 2005-06 are higher than the Anticipated Results 2005-2006 reported in this annex of the EI Expenditure Plan (Part II) for 2005-2006 because of the robust labour market performance during the reporting period and the use of a conservative approach to target setting by some provinces.
- 6 Includes Regular EBSM (210,000) and the Aboriginal Pan-Canadian EBSM (7,000).
- 7 Includes Regular EBSM (410,000) and the Aboriginal Pan-Canadian EBSM (15,000).

Part II of the EI Act which provides for the delivery of EBSMs stipulates that these programs and services be implemented within a framework for evaluating their success. The LMDAs require that the evaluations be designed to occur in phases: formative to occur in the program implementation phase, while summative evaluations occur some time later, once programs are up and running and post-program periods are long enough to determine impacts and effects.

Thirteen formative evaluations have been completed, and summative evaluations are completed or are in final stages of completion in six jurisdictions: British Columbia, Alberta, Nunavut, Quebec, Ontario and Newfoundland & Labrador. In Saskatchewan and New Brunswick, evaluations are advancing, and results are expected in 2006-2007. For Yukon, PEI and Nova Scotia, the evaluations have started but are in early stages, while for Manitoba and NWT; summative evaluations are at the planning stages.

General findings of these studies have been published in the 2005 Employment Insurance Monitoring and Assessment Report.

Consolidated Report on Canada Student Loans

In August 2000, the Canada Student Loans Program (CSLP) was shifted from the risk-shared financing arrangements that had been in place with financial institutions between 1995 and July 2000 to a direct student loan financing plan.³¹

This meant that the Program had to redesign the delivery mechanism in order to directly finance student loans. In the new arrangement, the Government of Canada provides the necessary funding to students and two service providers have contracts to administer the loans.

Reporting Entity

The entity detailed in this report is the Canada Student Loans Program only and does not include departmental operations related to the delivery of the CSLP. Expenditures figures are primarily statutory in nature, made under the authority of the *Canada Student Loans Act* and the *Canada Student Financial Assistance Act*.

Basis of Accounting

The financial figures are prepared in accordance with generally accepted accounting principles and as reflected in the *Public Sector Accounting Handbook* of the Canadian Institute of Chartered Accountants.

Specific Accounting Policies

Revenues

Two sources of revenue are reported: interest revenue on Direct Loans and recoveries on Guaranteed and Put Back Loans. Government accounting practices require that recoveries from both sources be credited to the government's Consolidated Revenue Fund. They do not appear along with the expenditures in the CSLP accounts, but are reported separately in the financial statements of Human Resources and Social Development Canada (HRSDC) and the government.

- **Interest Revenue on Direct Loans** – Borrowers are required to pay simple interest on their student loans once they leave full-time studies. At the time they leave school, students have the option of selecting a variable (prime + 2.5%) or fixed (prime + 5%) interest rate. The figures represent the interest accrued on the outstanding balance of the government-owned Direct Loans. Borrowers continue to pay the interest accruing on the guaranteed and risk-shared loans directly to the private lender holding these loans. Effective August 1, 2005, the weekly loan limit increased from \$165 per week to \$210 per week of study. As more funds will be available to students, total loan disbursements will likely grow, and as a result the interest revenue generated will likely increase.
- **Recoveries on Guaranteed Loans** – The government reimburses the private lenders for any loans issued prior to August 1, 1995 that go into default (i.e., lenders claim any amount of principal and interest not repaid in full). The figures represent the recovery of principal and interest on these defaulted loans.
- **Recoveries on Put-back Loans** – Under the risk-shared agreements, the government will purchase from the participating financial institutions any loans issued between August 1, 1995 to July 31, 2000 that are in default of payments for at least 12 months after the period of study, that in aggregate, do not exceed 3% of the average monthly balance of the lender's outstanding student loans in repayments. The amount paid is set at 5% of the value of the loans in question. The figures represent the recovery of principal and interest on these loans.

³¹ For further information on the Canada Student Loans Program, see http://www.hrsdc.gc.ca/en_gateways/topics/cxp-qxr.shtml

Canada Study Grants and Canada Access Grants

Canada Study Grants and Canada Access Grants improve access to post-secondary education by providing non-repayable financial assistance to post-secondary students. Four types of Canada Study Grants are available to assist: (1) students with permanent disabilities in order to meet disability-related educational expenses (up to \$8,000 annually); (2) students with dependants (up to \$3,120 for full-time students and up to \$1,920 for part-time students, annually); (3) high-need part-time students (up to \$1,200 annually); and (4) women in certain fields of Ph.D. studies (up to \$3,000 annually for up to three years). Two Canada Access Grants are available since August 1, 2005, to assist: (1) students from low-income families entering their first year of post-secondary studies (50% of tuition, up to \$3,000); and (2) students with permanent disabilities in order to assist with education and living expenses (up to \$2,000 annually)³².

Collection Costs

These amounts represent the cost of using private collection agencies to collect defaulted Canada Student Loans. The loans being collected include: risk-shared and guaranteed loans that have gone into default and for which the government has bought back from the private lender; and Direct Loans issued after July 31, 2000, that are returned to HRSDC by the third party service provider as having defaulted. As of August 1, 2005 the Canada Revenue Agency (CRA) Non Tax Collections Directorate undertook the responsibility for the administration of the collection activities of the guaranteed, risk-shared and direct student loans.

Service Provider Costs

CSLP uses third party service providers to administer loan origination, in-study loan management, post-studies repayment activities and debt management. This item represents the cost associated with these contracted services.

Risk Premium

Risk premium represents part of the remuneration offered to lending institutions participating in the risk-shared program from August 1, 1995 to July 31, 2000. The risk premium represents 5% of the value of loans being consolidated which is calculated and paid at the time students leave studies and go into repayment. In return, the lenders assume the risk associated with non-repayment of these loans.

Put-Back

Subject to the provisions of the contracts with lending institutions, the government will purchase from a lender the student loans that are in default of payment for at least 12 months and that, in aggregate, do not exceed 3% of the average monthly balance of the lender's outstanding student loans in repayments. The amount paid is set at 5% of the value of the loans in question. The figures also include any refund made to participating financial institutions on the recoveries.

Administrative Fees to Provinces and Territories

Pursuant to the *Canada Student Financial Assistance Act* (CSFA Act), the government has entered into arrangements with nine provinces and one territory to facilitate the administration of the CSLP. They administer the application and needs assessment activities associated with federal student financial assistance and in return they are paid an administrative fee. As of August 1, 2005 administrative fees paid to provinces were increased to improve the compensation for their part in the administration of the CSLP.

³² The new Canada Access Grant for Student with Permanent disabilities has replaced the Canada Study Grant for High-need Students with Permanent Disabilities.

In-Study Interest Borrowing Expense

The capital needed to issue the Direct Loans is raised through the Department of Finance's general financing activities. The cost of borrowing this capital is recorded in the Department of Finance's overall financing operations. The figures represent the cost attributed to CSLP in support of Direct Loans while students are considered in study status. Weekly loan limits increased effective August 1, 2005. As more funds will be available to students, total loan disbursements are likely to grow, and as a result the in-study interest borrowing expense will rise.

In-Repayment Interest Borrowing Expense

The capital needed to issue the Direct Loans is raised through the Department of Finance's general financing activities. The cost of borrowing this capital is recorded in the Department of Finance's overall financing operations. The figures represent the cost attributed to CSLP in support of Direct Loans while students are in repayment of their Canada Student Loans.

In-Study Interest Subsidy

A central feature of federal student assistance is that student borrowers are not required to pay the interest on their student loans as long as they are in full-time study and, in the case of loans negotiated prior to August 1, 1993, for six months after the completion of studies. Under the guaranteed and risk-shared programs, the government pays the interest to the lending institutions on behalf of the student.

Interest Relief

Assistance may be provided to cover loan interest and suspend payments on the principal of loans in repayment for up to 54 months for borrowers experiencing temporary difficulties repaying their loans. The shift from Guaranteed and Risk-Shared Loans to Direct Loans did not alter interest relief for loans in distress from the borrower's perspective; however, the method of recording associated costs changed. For loans issued prior to August 1, 2000, CSLP compensates lending institutions for lost interest equal to the accrued interest amount on loans under Interest Relief (IR). For loans issued after August 1, 2000, an interest relief expense is recorded to offset the accrued interest on direct loans. Effective August 1, 2005 income thresholds used to determine IR eligibility increased in order to make IR accessible to a greater number of borrowers.

Debt Reduction in Repayment

Debt Reduction in Repayment (DRR) assists borrowers experiencing long-term difficulties repaying their loans. DRR is a federal repayment assistance program through which the Government of Canada reduces a qualifying borrower's outstanding Canada Student Loans principal to an affordable amount after Interest Relief has been exhausted and only after 5 years have passed since the borrower ceased to be a student. As of August 1, 2005, the maximum amount of DRR assistance is \$26,000, which is available to eligible borrowers in an initial deduction of up to \$10,000, a second deduction of up to \$10,000 and a final deduction of up to \$6,000. For loans issued prior to August 1, 2000, CSLP pays the lending institutions the amount of student debt principal reduced by the Government of Canada under DRR. For loans issued after August 1, 2000, the Government of Canada forgives a portion of the loan principal.

Claims Paid and Loans Forgiven

From the beginning of the program in 1964 until July 31, 1995, the government fully guaranteed all loans issued to students by private lenders. The government reimburses private lenders for any of these loans that go into default (i.e., subject to specific criteria, lenders may claim any amount of principal and interest not repaid in full, after which the Canada Revenue Agency's (CRA) Collection Services will attempt to recover these amounts).³³ The risk-shared arrangements also permitted loans issued from August 1, 1995 to July 31, 2000 to be guaranteed under specific circumstances. This item represents the costs associated with loan guarantees.

Pursuant to the *Canada Student Loans Act* and the *Canada Student Financial Assistance Act*, the government incurs the full amount of the unpaid principal plus accrued interest in the event of the death of the borrower or, if the borrower becomes permanently disabled and cannot repay the loan without undue hardship.

Bad Debt Expense

Under Direct Loans, the government owns the loans issued to students and must record them as assets. As a result, generally accepted accounting principles require a provision be made for potential future losses associated with these loans. The provision must be made in the year the loans are issued even though the losses may occur many years later. The figures represent the annual expense against the provisions for Bad Debt and Debt Reduction in Repayment on Direct Loans.

Alternative Payments to Non-participating Provinces and Territories

Provinces and territories may choose not to participate in the CSLP. These provinces and territories receive an alternative payment to assist in the cost of delivering a similar student financial assistance program

Commitments

For the 2006-2007 fiscal year, the expected cash flow for Service Provider contracts is: \$94.8million. The current end date for the Service Provider contracts is July 31, 2007.

³³ An announcement was made on August 1, 2005 which transfers collections activities previously carried out by Social Development Canada (SDC) to Canada Revenue Agency.

Consolidated Canada Student Loans Programs – Financial Tables

Consolidated Canada Student Loans Programs - Combined Programs						
(millions of dollars)						
	Actual		Actual	Planned Spending ^e		
	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009
Revenue						
Interest Revenue on Direct Loans	174.3	226.6	315.7	419.8	507.0	584.2
Recoveries On Guaranteed Loans	91.3	76.2	66.8	66.6	61.9	55.1
Recoveries On Put-Back Loans	9.6	11.0	13.1	17.1	20.7	24.5
Total Revenue	275.2	313.8	395.6	503.5	589.6	663.8
Expenses						
<i>Transfer Payments</i>						
Canada Study Grants and Canada Access Grants	66.8	64.5	129.7	119.9	123.1	127.2
<i>Loan Administration</i>						
Collection Costs ^a	13.4	14.8	13.6	18.5	21.0	23.3
Service Bureau Costs	41.0	46.0	50.2	66.3	73.2	80.4
Risk Premium	11.7	5.5	2.7	4.8	2.6	1.3
Put-Back	4.3	4.2	4.3	4.4	4.3	4.4
Administrative Fees to Provinces and Territories	8.8	9.4	13.9	14.6	14.5	14.6
Total Loan Administration Expenses	79.2	79.9	84.7	108.6	115.6	124.0
<i>Cost of Government Support</i>						
<i>Benefits Provided to Students</i>						
In-Study Interest Borrowing Expense (Class A) ^b	148.6	163.8	159.3	166.5	172.9	181.7
In Repayment Interest Borrowing Expense (Class B) ^b	68.1	96.6	111.4	161.4	196.8	236.5
In-Study Interest Subsidy (Class A)	27.4	16.1	12.1	6.6	3.5	1.7
Interest Relief	73.8	63.2	67.2	70.7	72.6	74.8
Debt Reduction in Repayment	10.7	27.1	31.4	15.2	9.9	5.7
Claims Paid & Loans Forgiven	34.8	27.7	24.8	16.5	13.7	12.1
<i>Bad Debt Expense^c</i>						
Debt Reduction in Repayment Expense	11.5	11.5	13.3	13.3	13.4	13.7
Bad Debt Expense	193.3	456.2	297.2	322.5	343.2	368.7
Total Cost of Government Support Expenses	568.2	862.2	716.7	772.7	826.0	894.9
Total Expenses	714.2	1,006.6	931.1	1,001.2	1,064.7	1,146.1
Net Operating Results	439.0	692.8	535.5	497.7	475.1	482.3
Alternative Payments to Non-Participating Province and Territories	244.8	175.8	158.2	151.0	144.7	142.8
Final Operating Results	683.8	868.6	693.7	648.7	619.8	625.1

a) These costs are related to Canada Student Direct Loans but reported by the Department of Social Development Canada.

b) These costs are related to Canada Student Direct Loans but reported by the Department of Finance.

c) This represents the annual expense against the Provisions for Bad Debt and Debt Reduction in Repayment as required under Accrual Accounting. The Bad Debt Expense figure for 2004-2005 includes an adjustment of \$257.1 million following the revised Bad Debt Provision Rate published by the Office of the Chief Actuary in the Actuarial Report on the Canada Student Loans Program as at July 31, 2004. This adjustment is retroactive to the beginning of the Direct Loans Regime (2000).

d) Starting in 2003-2004, the figures represent the annual expense recorded under the Accrual Accounting as opposed to the actual amount disbursed to the Non-Participating Province and Territories. The actual cash expense for Alternative Payments to Non-Participating Provinces and Territories for 2005-2006 was \$ 161.3 M.

e) 2006-2007 and ongoing planned spending years exclude CSLP related amounts stemming from the Budget 2006 announcement.

Consolidated Canada Student Loans Programs - Direct Loans Only						
(millions of dollars)						
	Actual		Actual	Planned Spending^e		
	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009
Revenue						
Interest Revenue on Direct Loans	174.3	226.6	315.7	419.8	507.0	584.2
Expenses						
<i>Transfer Payments</i>						
Canada Study Grants and Canada Access Grants	66.8	64.5	129.7	119.9	123.1	127.2
<i>Loan Administration</i>						
Collection Costs ^a	4.1	7.0	6.9	11.3	13.7	16.2
Service Bureau Costs	41.0	46.0	50.2	66.3	73.2	80.4
Administrative Fees to Provinces and Territories	8.8	9.4	13.9	14.6	14.5	14.6
Total Loan Administration Expenses	53.9	62.4	71.0	92.2	101.4	111.2
<i>Cost of Government Support</i>						
<i>Benefits Provided to Students</i>						
In-Study Interest Borrowing Expense (Class A) ^b	148.6	163.8	159.3	166.5	172.9	181.7
In Repayment Interest Borrowing Expense (Class B) ^b	68.1	96.6	111.4	161.4	196.8	236.5
Interest Relief	20.0	28.4	43.9	56.7	63.2	69.1
Loans Forgiven	1.5	2.0	9.1	5.5	6.3	7.1
<i>Bad Debt Expense^c</i>						
Debt Reduction in Repayment Expense	11.5	11.5	13.3	13.3	13.4	13.7
Bad Debt Expense	193.3	456.2	297.2	322.5	343.2	368.7
Total Cost of Government Support Expenses	443.0	758.5	634.2	725.9	795.8	876.8
Total Expenses	563.7	885.4	834.9	938.0	1,020.3	1,115.2
Net Operating Results	389.4	658.8	519.2	518.2	513.3	531.0
Alternative Payments to Non-Participating Province and Territories	244.8	175.8	158.2	151.0	144.7	142.8
Final Operating Results	634.2	834.6	677.4	669.2	658.0	673.8

a) These costs are related to Canada Student Direct Loans but reported by the Department of Social Development Canada.

b) These costs are related to Canada Student Direct Loans but reported by the Department of Finance.

c) This represents the annual expense against the Provisions for Bad Debt and Debt Reduction in Repayment as required under Accrual Accounting. The Bad Debt Expense figure for 2004-2005 includes an adjustment of \$257.1 million following the revised Bad Debt Provision Rate published by the Office of the Chief Actuary in the Actuarial Report on the Canada Student Loans Program as at July 31, 2004. This adjustment is retroactive to the beginning of the Direct Loans Regime (2000).

d) Starting in 2003-2004, the figures represent the annual expense recorded under the Accrual Accounting as opposed to the actual amount disbursed to the Non-Participating Province and Territories. The actual cash expense for Alternative Payments to Non-Participating Provinces and Territories for 2005-2006 was \$ 161.3 M.

e) 2006-2007 and ongoing planned spending years exclude CSLP related amounts stemming from the Budget 2006 announcement.

Consolidated Canada Student Loans Programs - Risk-Shared and Guaranteed Loans Only						
(millions of dollars)						
	Actual		Actual	Planned Spending ^b		
	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009
Revenue						
Recoveries On Guaranteed Loans	91.3	76.2	66.8	66.6	61.9	55.1
Recoveries On Put-Back Loans	9.6	11.0	13.1	17.1	20.7	24.5
Total Revenue	100.9	87.2	79.9	83.7	82.6	79.6
Expenses						
<i>Loan Administration</i>						
Collection Costs ^a	9.3	7.8	6.7	7.2	7.3	7.1
Risk Premium	11.7	5.5	2.7	4.8	2.6	1.3
Put-Back	4.3	4.2	4.3	4.4	4.3	4.4
Total Loan Administration Expenses	25.3	17.5	13.7	16.4	14.2	12.8
<i>Cost of Government Support</i>						
<i>Benefits Provided to Students</i>						
In-Study Interest Subsidy (Class A)	27.4	16.1	12.1	6.6	3.5	1.7
Interest Relief	53.8	34.8	23.3	14.0	9.4	5.7
Debt Reduction in Repayment	10.7	27.1	31.4	15.2	9.9	5.7
Claims Paid & Loans Forgiven	33.3	25.7	15.7	11.0	7.4	5.0
Total Cost of Government Support Expenses	125.2	103.7	82.5	46.8	30.2	18.1
Total Expenses	150.5	121.2	96.2	63.2	44.4	30.9
Net Operating Results	49.6	34.0	16.3	(20.5)	(38.2)	(48.7)

a) These costs are related to Canada Student Direct Loans but reported by the Department of Social Development Canada.

b) 2006-2007 and ongoing planned spending years exclude CSLP related amounts stemming from the Budget 2006 announcement.



OTHER ITEMS OF INTEREST

2006-2007 Main Estimates Cross Walk to Program Activity Layout for RPP

SDC Main Estimates					Social Investment		Service Delivery	Social Development Policy and Innovation
HRSDC Main Estimates	Employment Insurance Employment Programs	Workplace Skills	Learning	Labour		Homelessness	Service Delivery	Policy and Program Support
Program Activity Presentation for Report on Plans and Priorities	Labour Market: Employment Insurance Employment Programs	Workplace Skills	Learning	Labour	Social Investment Children and Families	Housing and Homelessness	Seamless, Citizen-Centred Service Integrity Collaborative, Networked Government Services	Policy, Research and Communication



WEBSITE REFERENCES

HRSDC Website

<http://www.hrsdc.gc.ca/en/home.shtml>

The Honourable Diane Finley P.C., M.P.

Minister of Human Resources and Social Development Canada

<http://pm.gc.ca/eng/bio.asp?id=64>

The Honourable Jean-Pierre Blackburn

Minister of Labour and Housing

<http://pm.gc.ca/eng/bio.asp?id=50>

Acts and Regulations Governing HRSDC and SDC

<http://www.hrsdc.gc.ca/en/cs/fas/as/contact/acts.shtml>

HRSDC Overview

- List of HRSDC Programs and Services
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/ps.shtml
- Speech from the Throne, October 5, 2004
<http://pm.gc.ca/eng/sft-ddt.asp>

Enhanced Canadian productivity and participation through efficient and inclusive labour markets, competitive workplaces and access to learning

Labour Market

- Employment Insurance Benefits
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/ei.shtml
- Employment Benefits and Support Measures
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/gc.shtml
- Labour Market Development Agreements
http://www.tbs-sct.gc.ca/rma/epi-ibdrp/hrdb-rhbd/lmda-edmt/description_e.asp
- Aboriginal Human Resources Development Strategy
http://www17.hrdc-drhc.gc.ca/AHRDSInternet/general/public/HomePage1_e.asp
http://www17.hrdc-drhc.gc.ca/AHRDSInternet/general/public/HomePage1_f.asp
- Aboriginal Skills and Employment Partnerships
http://www17.hrdc-drhc.gc.ca/AHRDSInternet/general/public/asep/asep_e.asp
- http://www17.hrdc-drhc.gc.ca/AHRDSInternet/general/public/asep/asep_f.asp
- Youth Employment Strategy
<http://www.youth.gc.ca>
- Official Language Minority Communities
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/solmc.shtml
- Work Sharing
http://www.hrsdc.gc.ca/en/epb/sid/cia/grants/ws/desc_ws.shtml

Workplace Skills

- Human Resources Partnerships
 - The Sector Council Program
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/spi.shtml
 - Essential Skills
http://www.hrsdc.gc.ca/en/hip/hrp/essential_skills/essential_skills_index.shtml
 - National Occupational Classification
http://www.hrsdc.gc.ca/en/hip/hrp/noc/noc_index.shtml
 - Apprenticeship and Labour Mobility Initiatives
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/almi.shtml

- The Foreign Worker Program
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/fw.shtml
- Labour Market Information
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/lmi.shtml

Learning

- Student Financial Assistance (Canada Student Loans Program)
<http://www.hrsdc.gc.ca/en/gateways/topics/cxp-gxr.shtml> and <http://www.canlearn.ca>
- Canada Education Savings Grant
<http://www.hrsdc.gc.ca/en/gateways/topics/cgs-gxr.shtml>
- Adult Learning, Literacy and Essential Skills Program
<http://www.hrsdc.gc.ca/en/gateways/topics/lxa-gxr.shtml>
<http://www.hrsdc.gc.ca/en/gateways/topics/lxi-gxr.shtml>
- International Academic Mobility
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/iam.shtml

Safe, healthy, fair, stable, cooperative and productive workplaces and effective international labour standards

- The Federal Mediation and Conciliation Service
<http://www.hrsdc.gc.ca/asp/gateway.asp?hr=/en/lp/fmcs/02About.shtml&hs=mxm>
- National Labour Operations
http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/labour.shtml
- International Labour Affairs
<http://www.hrsdc.gc.ca/en/lp/ila/index.shtml>
- Work-life Balance and Ageing Workforce
<http://www.hrsdc.gc.ca/en/gateways/topics/wnc-gxr.shtml>

Enhanced income security, access to opportunities and well-being for individuals, families and communities

Social Investment

- Income Security Programs
http://www.sdc.gc.ca/en/gateways/nav/top_nav/program/isp.shtml
- Seniors
<http://www.sdc.gc.ca/en/gateways/individuals/audiences/seniors.shtml>
- Office for Disability issues
http://www.sdc.gc.ca/en/hip/odi/01_about.shtml
- Persons with Disabilities
<http://www.sdc.gc.ca/en/gateways/individuals/audiences/pd.shtml>
- Social Economy
http://www.sdc.gc.ca/en/cs/comm/sd/social_economy.shtml
- Voluntary sector
http://www.sdc.gc.ca/en/hip/sd/06_vsi.shtml
- Social development partnerships Program
http://www.sdc.gc.ca/en/hip/sd/05_SDPP.shtml
- Community development and partnership directorate
http://www.sdc.gc.ca/en/hip/sd/999_CDPD.shtml
- Task force on community investments
<http://www.sdc.gc.ca/en/hip/sd/TaskForce/overview.shtml>
- New horizons for seniors
<http://www.sdc.gc.ca/en/isp/horizons/toc.shtml>
- Understanding the early years
http://www.sdc.gc.ca/en/hip/sd/300_UEYInfo.shtml
- Grants and contributions
http://www.sdc.gc.ca/en/gateways/sd/nav/top_nav/program/gc.shtml

Children and Families

- Canada's Universal Child Care Plan
<http://www.universalchildcare.ca>
- Federal/Provincial/Territorial Early Childhood Development Agreement
<http://www.ecd-elcc.ca>
- Multilateral Framework on Early Learning and Child Care
<http://www.ecd-elcc.ca>
- The National Child Benefit
<http://www.nationalchildbenefit.ca>

Housing and Homelessness

- The National Homelessness Initiative
http://www.homelessness.gc.ca/home/index_e.asp
- The National Homelessness Initiative Programs
http://www.homelessness.gc.ca/initiative/nhiprograms_e.asp

Achieve better outcomes for Canadians through service excellence

- Service Canada
<http://www.servicecanada.gc.ca/en/home.html>

Questions and Public Enquiries

If you have questions about departmental programs and services, you may contact your nearest Service Canada office listed in the Government of Canada pages of the telephone book or through the HRSDC website at http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/our_offices.shtml.

To obtain HRSDC publications, please contact the Public Enquiries Centre at http://www.hrsdc.gc.ca/en/gateways/nav/left_nav/publications.shtml

Enfants et familles

- Plan universel pour la garde d'enfants du Canada
<http://www.gardeenfants.ca>
- Entente fédérale, provinciale et territoriale sur le développement de la petite enfance
<http://www.ecd-elcc.ca>
- Cadre multilatéral pour l'apprentissage et la garde des jeunes enfants
<http://www.ecd-elcc.ca>
- Prestation nationale pour enfants
<http://www.prestationnationalepourenfants.ca/>

Logement et sans-abri

- Initiative nationale pour les sans-abri
http://www.homelessness.gc.ca/home/index_f.asp
- Programmes relevant de l'Initiative nationale pour les sans-abri
http://www.homelessness.gc.ca/initiative/nhiprograms_f.asp

Améliorer les résultats des Canadiens grâce à l'excellence du service

- Service Canada
<http://www.servicecanada.gc.ca/fr/accueil.html>

Questions et demandes de renseignements du public

Si vous avez des questions à poser au sujet des programmes et des services du Ministère, adressez-vous au bureau le plus proche de Service Canada en consultant les pages « Gouvernement du Canada » de l'annuaire téléphonique ou le site Web de RHDSC.
http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/nos_bureaux.shtml

Pour obtenir les publications de RHDSC, prière de s'adresser au Centre de renseignements à http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_gauche/publications.shtml

- Information sur les marchés du travail
http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/mt.shtml
- Apprentissage
- Aide financière aux étudiants (Programme canadien de prêts aux étudiants)
<http://www.rhdcc.gc.ca/fr/passezelles/topiques/cxp-gxr.shtml>
[et http://www.canlearn.ca](http://www.canlearn.ca)
- Subvention canadienne pour l'épargne-études
<http://www.rhdcc.gc.ca/fr/passezelles/topiques/cgs-gxr.shtml>
- Programme Apprentissage des adultes, alphabétisation et compétences essentielles
<http://www.rhdcc.gc.ca/fr/passezelles/topiques/cgs-gxr.shtml>
- Mobilité académique internationale
<http://www.rhdcc.gc.ca/fr/passezelles/topiques/xi-gxr.shtml>
http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/mai.shtml
- Milieux de travail sécuritaires, sains, équitables, stables, productifs où règne la coopération, et normes internationales du travail efficaces
- Service fédéral de médiation et de conciliation
http://www.rhdcc.gc.ca/asp/passezelle.asp?hr=fr/pt/sfmc/02Au_sujet.shtml&hs=mxm
- Opérations nationales du travail
http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/travail.shtml
- Affaires internationales du travail
<http://www.rhdcc.gc.ca/fr/pta/index.shtml>
- Conciliation travail-vie et vieillissement de la main-d'œuvre
<http://www.rhdcc.gc.ca/fr/passezelles/topiques/wnc-gxr.shtml>
- Amélioration de la sécurité du revenu, accès aux possibilités, inclusion sociale et mieux être des personnes, des familles et des collectivités
- Investissement social

- Programmes de sécurité du revenu
http://www.dsc.gc.ca/fr/passezelles/nav/nav_haut/programme/psr.shtml
- Aînés
<http://www.dsc.gc.ca/fr/passezelles/particuliers/auditoires/aines.shtml>
- Bureau de la condition des personnes handicapées (BCPH)
http://www.dsc.gc.ca/fr/pip/bcph/01_apropos.shtml
- Personnes handicapées
<http://www.dsc.gc.ca/fr/passezelles/particuliers/auditoires/ph.shtml>
- Économie sociale
http://www.dsc.gc.ca/fr/sm/comm/ds/economie_sociale.shtml
- Secteur bénévolé
http://www.dsc.gc.ca/fr/pip/ds/06_isb.shtml
- Programme de partenariats pour le développement social
http://www.dsc.gc.ca/fr/pip/ds/05_PPS.shtml
- Direction du développement communautaire et des partenariats
http://www.dsc.gc.ca/fr/pip/ds/99_DDPG.shtml
- Groupe de travail sur les investissements communautaires
<http://www.dsc.gc.ca/fr/pip/ds/GroupeDeTravail/vue.shtml>
- Programme Nouveaux horizons pour les aînés
<http://www.dsc.gc.ca/fr/psr/horizons/tabmat.shtml>
- Comprendre la petite enfance
http://www.dsc.gc.ca/fr/pip/ds/300_CPEinfo.shtml
- Subventions et contributions
http://www.dsc.gc.ca/fr/passezelles/ds/nav/nav_haut/programme/sc.shtml

Site Web de RHDSC

<http://www.rhdcc.gc.ca/fr/accueil.shtml>

L'honorable Diane Finley, C.P., députée

Ministre des Ressources humaines et du Développement social Canada

<http://pm.gc.ca/tra/bio.asp?id=64>

L'honorable Jean-Pierre Blackburn, C.P., député

Ministre du Travail et du Logement

<http://pm.gc.ca/tra/bio.asp?id=50>

Lois et règlements régissant RHDCC et DSC

<http://www.rhdcc.gc.ca/fr/sms/sa/contact/lois.shtml>

Aperçu de RHDSC

➤ Liste des programmes et des services de RHDSC

http://www.rhdcc.gc.ca/fr/passereilles/nav/nav_haut/ps.shtml

➤ Discours du Trône, 5 octobre 2004

<http://pm.gc.ca/eng/sft-ddt.asp>

Productivité et participation canadiennes accrues par des marchés du travail efficaces et inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage

Marché du travail

➤ Prestations d'assurance-emploi

http://www.rhdcc.gc.ca/fr/passereilles/nav/nav_haut/programme/ae.shtml

➤ Prestations d'emploi et mesures de soutien

http://www.rhdcc.gc.ca/fr/passereilles/nav/nav_haut/programme/sc.shtml

➤ Ententes sur le développement du marché du travail

http://www.tbs-sct.gc.ca/rma/eppl-bdrp/hrdb-rhbd/lmda-edmt/description_f.asp

➤ Stratégie de développement des ressources humaines autochtones

http://www17.hrdc-drhc.gc.ca/AH/RD/SInternet/general/public/HomePage1_f.asp

➤ Partenariats pour les compétences et l'emploi des Autochtones

http://www17.hrdc-drhc.gc.ca/AH/RD/SInternet/general/public/asep/asep_f.asp

➤ Stratégie emploi jeunesse

<http://www.jeunesse.gc.ca>

➤ Communautés minoritaires de langue officielle

http://www.rhdcc.gc.ca/fr/passereilles/nav/nav_haut/programme/scmllo.shtml

➤ Travail partagé

http://www.rhdcc.gc.ca/fr/dgpe/dis/cia/subventions/tp/descf_tp.shtml

Compétences en milieu de travail

➤ Partenariats en ressources humaines

- Programme des conseils sectoriels

http://www.rhdcc.gc.ca/fr/passereilles/nav/nav_haut/programme/ips.shtml

- Compétences essentielles

http://www.rhdcc.gc.ca/fr/pip/prh/competences_essentielles/competences_essentielles_index.shtml

- Classification nationale des professions

http://www.rhdcc.gc.ca/fr/pip/prh/cnp/cnp_index.shtml

- Initiatives de l'apprentissage et de la mobilité de la main-d'œuvre

http://www.rhdcc.gc.ca/fr/passereilles/nav/nav_haut/programme/imammo.shtml

➤ Programme des travailleurs étrangers

http://www.rhdcc.gc.ca/fr/passereilles/nav/nav_haut/programme/te.shtml

RÉFÉRENCES - SITES INTERNET



Budget principal des dépenses 2006-2007 et Architecture des activités de programmes pour le RPP

Budget principal des dépenses de DSC	Budget principal des dépenses de RHDCC	Architecture des activités de programmes pour le Rapport sur les plans et les priorités
	Assurance-emploi	Marché du travail : Assurance-emploi
	Compétences en milieu de travail	Compétences en milieu de travail
	Appren-tissage	Appren-tissage
	Travail	Travail
Investisse-ment social		Investisse-ment social
	Sans-abri	Logement et sans-abri
Prestation de services	Prestation de services	Services décloisonné et axé sur les citoyens
Politiques et Développement – innovation – social	Soutien aux politiques et aux programmes	Recherche en politiques et communications
		Intégrité
		Services gouvernementaux fondés sur la collaboration et structures en réseau

AUTRES POINTS D'INTÉRÊT



Ventilation consolidée du Programme canadien de prêts aux étudiants - Prêts garantis et à risques partagés seulement

(en millions de dollars)

	2003-2004 2004-2005		2005-2006		2006-2007 2007-2008 2008-2009	
	Dépenses réelles	Dépenses réelles	Dépenses réelles	Dépenses prévues ^b	Dépenses prévues ^b	Dépenses prévues ^b
Revenus						
Sommes recouvrées sur les prêts garantis	91,3	76,2	66,8	66,6	61,9	55,1
Sommes recouvrées sur les reprises de prêts	9,6	11,0	13,1	17,1	20,7	24,5
Total Revenu	100,9	87,2	79,9	83,7	82,6	79,6
Dépenses						
Administration des prêts	9,3	7,8	6,7	7,2	7,3	7,1
Frais de recouvrement ^a	11,7	5,5	2,7	4,8	2,6	1,3
Prime de risque	4,3	4,2	4,3	4,4	4,3	4,4
Reprise de prêts	25,3	17,5	13,7	16,4	14,2	12,8
Total des frais d'administration des prêts	49,3	34,5	27,7	35,8	32,1	29,6
Coût de l'aide gouvernementale	27,4	16,1	12,1	6,6	3,5	1,7
Bonification d'intérêts pendant les études (classe A)	53,8	34,8	23,3	14,0	9,4	5,7
Exemption d'intérêts	10,7	27,1	31,4	15,2	9,9	5,7
Réduction de la dette en cours de remboursement	33,3	25,7	15,7	11,0	7,4	5,0
Réclamations payées et prêts pardonnés	125,2	103,7	82,5	46,8	30,2	18,1
Total du coût de l'aide gouvernementale	150,5	121,2	96,2	63,2	44,4	30,9
Résultats d'exploitation nets	49,6	34,0	16,3	(20,5)	(38,2)	(48,7)

a) Ces dépenses se rapportent aux prêts canadiens directs d'études mais sont déclarées par le ministre du Développement social Canada.
 b) Les dépenses prévues présentées pour l'année 2006-2007 ainsi que les années suivantes, n'incluent pas les annonces fait dans le Budget 2006.

Ventilation consolidée du Programme canadien de prêts aux étudiants - Prêts directs seulement

(en millions de dollars)			
	2003-2004	2004-2005	2005-2006
Dépenses réelles	2003-2004	2004-2005	2005-2006
Dépenses prévues ^a	2006-2007	2007-2008	2008-2009
Revenus			
Intérêts gagnés sur les prêts directs	174,3	226,6	315,7
			419,8
			507,0
			584,2
Dépenses			
Paiements de transfert			
Subventions canadiennes pour études et pour l'accès aux études	66,8	64,5	129,7
pour l'accès aux études			119,9
			123,1
			127,2
Administration des prêts			
Frais de recouvrement ^b	4,1	7,0	6,9
			11,3
			13,7
			16,2
Coûts des fournisseurs de service	41,0	46,0	50,2
			66,3
			73,2
			80,4
			14,6
Frais d'administration des provinces et territoires	8,8	9,4	13,9
			14,6
			111,2
Coût de l'aide gouvernementale			
Avantages consentis aux étudiants	148,6	163,8	159,3
			166,5
			172,9
			181,7
Frais d'intérêts liés aux emprunts pendant les études (classe A) ^b			
Frais d'intérêts liés aux emprunts pendant le remboursement (classe B) ^b	68,1	96,6	111,4
			161,4
			196,8
			236,5
Exemption d'intérêts	20,0	28,4	43,9
			56,7
			63,2
			69,1
Réclamations payées et prêts pardonnés	1,5	2,0	9,1
			5,5
			6,3
			7,1
Créances irrécouvrables ^c			
Réduction de la dette en cours de remboursement	11,5	11,5	13,3
			13,3
			13,4
			13,7
Créances irrécouvrables	193,3	456,2	322,5
			343,2
			368,7
Total du coût de l'aide gouvernementale	443,0	758,5	634,2
			725,9
			795,8
			876,8
Total des dépenses	563,7	885,4	834,9
			938,0
			1 020,3
			1 115,2
Résultats d'exploitation nets	389,4	658,8	519,2
			518,2
			513,3
			531,0
Paiements compensatoires aux province non participant et Territoires d	244,8	175,8	158,2
			144,7
			142,8
			151,0
Résultats d'exploitation finaux	634,2	834,6	677,4
			669,2
			658,0
			673,8

a) Ces dépenses se rapportent aux prêts canadiens directs déduits mais sont déclarées par le ministre du Développement social Canada.

b) Ces dépenses se rapportent aux prêts canadiens directs déduits mais sont déclarées par le ministère des Finances.

c) Correspond à la charge annuelle contre les provisions pour créances irrécouvrables et la réduction de la dette en cours de remboursement, conformément à la comptabilité d'exercice. Le montant des créances irrécouvrables pour 2004-2005 inclut un rajustement de 257,1 millions de dollars afin d'inclure la charge en contrepartie de la provision des intérêts à recevoir sur les prêts en défaut, conformément au rapport actuariel sur le Programme canadien de prêts aux étudiants en date du 31 juillet 2004. Ce rajustement est rétroactif au début du régime de financement direct (2000).

d) Depuis 2003-2004, ces données représentent la charge annuelle comptabilisée en vertu de la méthode de comptabilité d'exercice, et non pas le montant réel versé aux provinces et territoires non participants. Le montant total des paiements compensatoires aux provinces non participantes et territoires est de \$ 161,3M.

e) Les dépenses prévues présentées pour l'année 2006-2007 ainsi que les années suivantes, n'incluent pas les annonces fait dans le Budget 2006.

Ventilation consolidée du Programme canadien de prêts aux étudiants – Tableaux financiers

Ventilation consolidée du Programme canadien de prêts aux étudiants - Programmes combinés					(en millions de dollars)	
	Dépenses réelles	Dépenses réelles	Dépenses prévues ^e			
	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009
Revenus						
Intérêts gagnés sur les prêts directs	174,3	226,6	315,7	419,8	507,0	584,2
Sommes recouvrées sur les prêts garantis	91,3	76,2	66,8	66,6	61,9	55,1
Sommes recouvrées sur les reprises de prêts	9,6	11,0	13,1	17,1	20,7	24,5
Total des revenus	<u>275,2</u>	<u>313,8</u>	<u>395,6</u>	<u>503,5</u>	<u>589,6</u>	<u>663,8</u>
Dépenses						
Paielements de transfert	66,8	64,5	129,7	119,9	123,1	127,2
Subventions canadiennes pour études et pour l'accès aux études pour l'accès aux études						
Administration des prêts	13,4	14,8	13,6	18,5	21,0	23,3
Frais de recouvrement ^a						
Coûts des fournisseurs de service	41,0	46,0	50,2	66,3	73,2	80,4
Prime de risque	11,7	5,5	2,7	4,8	2,6	1,3
Reprise de prêts	4,3	4,2	4,3	4,4	4,3	4,4
Frais d'administration des provinces et territoires	8,8	9,4	13,9	14,6	14,5	14,6
Total des frais d'administration des prêts	<u>79,2</u>	<u>79,9</u>	<u>84,7</u>	<u>108,6</u>	<u>115,6</u>	<u>124,0</u>
Coût de l'aide gouvernementale						
Avantages consentis aux étudiants	148,6	163,8	159,3	166,5	172,9	181,7
Frais d'intérêts liés aux emprunts pendant les études (classe A) ^b	68,1	96,6	111,4	161,4	196,8	236,5
Frais d'intérêts liés aux emprunts pendant le remboursement (classe B) ^b	27,4	16,1	12,1	6,6	3,5	1,7
Exemption d'intérêts	73,8	63,2	67,2	70,7	72,6	74,8
Réduction de la dette en cours de remboursement	10,7	27,1	31,4	15,2	9,9	5,7
Réclamations payées et prêts pardonnés	34,8	27,7	24,8	16,5	13,7	12,1
Créances irrécouvrables^c						
Réduction de la dette en cours de remboursement	11,5	11,5	13,3	13,3	13,4	13,7
Créances irrécouvrables	193,3	456,2	297,2	322,5	343,2	368,7
Total du coût de l'aide gouvernementale	<u>568,2</u>	<u>862,2</u>	<u>716,7</u>	<u>772,7</u>	<u>826,0</u>	<u>894,9</u>
Résultats d'exploitation nets	<u>714,2</u>	<u>1 006,6</u>	<u>931,1</u>	<u>1 001,2</u>	<u>1 064,7</u>	<u>1 146,1</u>
Paielements compensatoires aux province non participant et Territoires ^d	244,8	175,8	158,2	151,0	144,7	142,8
Résultats d'exploitation finaux	<u>683,8</u>	<u>868,6</u>	<u>693,7</u>	<u>648,7</u>	<u>619,8</u>	<u>625,1</u>

a) Ces dépenses se rapportent aux prêts canadiens directs d'études mais sont déclarées par le ministère du Développement social Canada.

b) Ces dépenses se rapportent aux prêts canadiens directs d'études mais sont déclarées par le ministère des Finances.

c) Correspond à la charge annuelle contre les provisions pour créances irrécouvrables et la réduction de la dette en cours de remboursement, conformément à la comptabilité d'exercice. Le montant des créances irrécouvrables pour 2004-2005 inclut un rajustement de 257,1 millions de dollars afin d'inclure la charge en contrepartie de la provision des intérêts à recevoir sur les prêts en défaut, conformément au rapport actualisé sur le Programme canadien de prêts aux étudiants en date du 31 juillet 2004. Ce rajustement est rétroactif au début du régime de financement direct (2000).

d) Depuis 2003-2004, ces données représentent la charge annuelle comptabilisée en vertu de la méthode de comptabilité d'exercice, et non pas le montant réel versé aux provinces et territoires non participants. Le montant total des paiements compensatoires aux provinces non participantes et territoires est de \$ 161,3M.

e) Les dépenses prévues présentées pour l'année 2006-2007 ainsi que les années suivantes, n'incluent pas les annonces fait dans le Budget 2006.

Réclamations réglées et prêts radiés

Depuis l'entrée en vigueur du Programme, en 1964 jusqu'au 31 juillet 1995, le gouvernement garantissait pleinement tous les prêts consentis à des étudiants par des prêteurs privés. Il rembourse aux prêteurs privés les prêts d'études non remboursés (sous réserve de certaines conditions, les emprunteurs peuvent réclamer une partie du capital ou des intérêts non remboursés intégralement que les Services nationaux aux accords sur les risques partagés, les prêts consentis entre le 1^{er} août 1995 et le 31 juillet 2000 étaient également garantis dans certaines circonstances. Ce poste représente les coûts associés à cette garantie de prêt.

Conformément à la *Loi canadienne sur les prêts aux étudiants* et à la *Loi fédérale sur l'aide financière aux étudiants*, le gouvernement verse à l'établissement prêteur le plein montant du capital non remboursé de même que les intérêts courus si l'emprunteur est décédé ou s'il est atteint d'une incapacité permanente et qu'il ne peut rembourser son prêt sans privations excessives.

Créances irrécouvrables

En vertu du programme de prêts directs, les prêts d'études sont dorénavant la propriété du gouvernement et il doit les comptabiliser en tant qu'éléments d'actif. Par conséquent, les principes comptables généralement reconnus exigent qu'une provision entourant les pertes éventuelles associées à ces prêts soit établie. Cette provision doit être établie au cours de l'année de versement du prêt, et ce, même s'il se peut que les pertes ne surviennent que bien des années plus tard. Les montants représentent les dépenses annuelles enregistrées contre les provisions pour créances irrécouvrables, et la réduction de la dette en cours de remboursement sur les prêts directs.

Paiements compensatoires aux provinces et territoire non participantes

Les provinces et territoires ont le choix de ne pas participer au PCPE. En retour, ces provinces et territoires ont droit à un montant compensatoire pour les aider à payer les coûts d'exécution d'un programme analogue d'aide financière aux étudiants.

Engagements

Pour l'exercice 2006-2007, les mouvements de trésorerie prévus pour les contrats des fournisseurs de service sont de 94,8 millions de dollars. La date à laquelle les contrats des fournisseurs de services prendront fin est actuellement fixée au 31 juillet 2007.

Frais d'intérêts liés aux emprunts pendant les études

Le capital requis pour accorder un prêt direct est réuni grâce aux activités générales de financement du ministère des Finances et le coût d'emprunt de ce capital est comptabilisé à même les opérations de financement global de ce ministère. Les montants représentant le coût attribué au PCPE au titre des prêts directs pendant que les étudiants poursuivent leurs études. Depuis le 1^{er} août 2005, la limite hebdomadaire des prêts étudiants est plus élevée. Compte tenu que les étudiants pourront bénéficier de plus d'argent, l'affectation totale des prêts va probablement grimper et par conséquent, les frais d'intérêts liés aux emprunts pendant les études augmenteront sans doute.

Frais d'intérêts liés aux emprunts pendant le remboursement

Le capital requis pour les prêts directs est réuni grâce aux activités générales de financement du ministère des Finances et le coût d'emprunt de ce capital est comptabilisé à même les opérations de financement global de ce ministère. Les montants apparaissant dans les tableaux financiers représentent le coût attribué au PCPE à l'appui des prêts directs pendant que les étudiants remboursent leur prêt d'études canadien.

Bonification d'intérêts pendant les études

L'une des principales caractéristiques du programme fédéral d'aide aux étudiants est que les étudiants emprunteurs ne sont pas tenus de payer les intérêts sur leurs prêts tant qu'ils étudient à plein temps, et, pour les prêts négociés avant le 1^{er} août 1993, durant six mois après la fin des études. Dans le cadre des programmes de prêts garantis et à risques partagés, le gouvernement paye les intérêts aux institutions prêteuses pour le compte des étudiants.

Exemption d'intérêts

Les emprunteurs qui ont de la difficulté passer leur prêt peuvent obtenir de l'aide financière couvrant les intérêts et visant à suspendre les paiements sur le capital des prêts à rembourser pendant une période maximale de 54 mois. La transition des prêts garantis et à risques partagés aux prêts directs n'a pas affecté l'exemption d'intérêts sur les prêts en souffrance du point de vue de l'emprunteur, mais la méthode de comptabilisation des coûts connexes a changé. Pour les prêts consentis avant le 1^{er} août 2000, le PCPE verse aux institutions prêteuses une indemnisation pour intérêts perdus, équivalente au montant des intérêts courus sur les prêts faisant l'objet d'une exemption d'intérêts. Dans le cas des prêts consentis après le 1^{er} août 2000, une dépense d'exemption d'intérêts est enregistrée contre les intérêts courus sur les prêts directs. Depuis le 1^{er} août 2005, le seuil de revenu fixé pour établir l'admissibilité à l'exemption d'intérêts a été relevé afin que plus d'emprunteurs puissent en bénéficier.

Réduction de la dette en cours de remboursement

Le programme de réduction de la dette en cours de remboursement (RDR) aide les emprunteurs aux prises avec des difficultés financières long terme à rembourser leurs prêts. La RDR est un programme fédéral d'aide au remboursement dans le cadre duquel le gouvernement canadien, une fois que toutes les autres mesures d'exemption d'intérêts ont été épuisées, réduit jusqu'à un montant abordable le capital impayé des prêts consentis aux emprunteurs admissibles et seulement après une période de cinq ans après la fin des études à temps plein de l'étudiant. Depuis le 1^{er} août 2005, le montant maximum de la réduction s'élève à 26 000 \$, lequel sera offert aux emprunteurs admissibles sous forme d'une réduction initiale pouvant atteindre 10 000 \$, suivie d'une seconde pouvant atteindre 10 000 \$ et enfin, d'une troisième pouvant atteindre 6 000 \$. Pour les prêts consentis avant le 1^{er} août 2000, le PCPE verse aux institutions prêteuses le montant du capital de la dette de l'étudiant réduit par le gouvernement canadien en vertu de la RDR. Dans le cas des prêts consentis après le 1^{er} août 2000, le gouvernement du Canada renonce à une partie du capital de l'emprunt.

Subventions canadiennes pour études et pour accès

Les Subventions canadiennes pour études et les Subventions canadiennes pour l'accès aux études améliorent l'accessibilité aux études postsecondaires en offrant à des étudiants de niveau postsecondaire de l'aide financière non remboursable. Quatre types de subventions sont offertes : 1) celles destinées aux étudiants ayant une incapacité permanente pour les frais liés aux études postsecondaires (jusqu'à 8 000 \$ par année); 2) celles destinées aux étudiants ayant des personnes à charge (jusqu'à 3 120 \$ par année pour les étudiants à temps plein et jusqu'à 1 920 \$ pour les étudiants à temps partiel); 3) celles destinées aux étudiants à temps partiel dans le besoin (jusqu'à 1 200 \$ par année); 4) celles destinées aux étudiantes de doctorat dans certains domaines (jusqu'à 3 000 \$ par année pour une période pouvant aller jusqu'à trois ans). Depuis le 1^{er} août 2005, deux subventions canadiennes pour l'accès aux études sont disponibles pour aider 1) les étudiants issus de famille à faible revenu qui entreprennent leur première année d'études postsecondaires (50 % des frais de scolarité, jusqu'à un maximum de 3 000 \$) et 2) les étudiants ayant une incapacité permanente pour les inciter à poursuivre leurs études et pour couvrir leurs frais de subsistance (jusqu'à 2 000 \$ par année)³².

Frais de recouvrement

Les frais de recouvrement correspondent à ce qu'il en coûte pour faire appel à des agences privées dans le but de recouvrer les prêts d'études canadiens non remboursés. Les prêts faisant l'objet de mesures de recouvrement sont : les prêts à risques partagés et les prêts garantis qui sont en souffrance pour lesquels le gouvernement a remboursé le prêteur privé, et les prêts directs versés après le 31 juillet 2000 qu'un tiers fournisseur de services a renvoyés à RHDSC parce qu'ils n'étaient pas remboursés. Depuis le 1^{er} août 2005, la Direction des recouvrements non fiscaux de l'Agence du revenu du Canada (ARC) assume la responsabilité d'administrer le recouvrement des prêts d'études garantis, à risques partagés et directs.

Coûts des fournisseurs de services

Le PCPE fait appel à des tiers fournisseurs de services pour administrer la constitution d'un dossier de prêt, la gestion en cours d'études, le remboursement une fois les études terminées et la gestion de la dette. Ce poste représente les coûts associés aux services prévus dans l'accord.

Prime de risque

La prime de risque constitue une partie de la rémunération versée aux institutions prêteuses ayant participé au programme de prêts à risques partagés entre le 1^{er} août 1995 et le 31 juillet 2000. Elle correspondait à 5 % de la valeur des prêts consolidés, laquelle était calculée et payée au moment où ces derniers terminaient leurs études et commençaient à rembourser leur dette. En retour, les prêteurs assumaient tous les risques associés au non remboursement des prêts.

Reprise de prêts

Selon les dispositions des accords conclus avec les institutions prêteuses, le gouvernement achète du prêt les prêts d'études non remboursés depuis au moins 12 mois et dont la somme totale n'excède pas 3 % du solde mensuel moyen des prêts en cours de remboursement mais non remboursés de l'institution prêteuse. Le montant versé est fixé à 5 % de la valeur des prêts en question. Les montants comprennent également les sommes versées aux institutions prêteuses sur les recouvrements.

Frais d'administration des provinces et des territoires

Conformément à la *Loi fédérale sur l'aide financière aux étudiants*, le gouvernement a conclu avec neuf provinces participantes et un territoire des accords visant à faciliter l'administration du PCPE. Les provinces et le territoire administrent les activités de mise en application et d'évaluation des besoins inhérentes au programme fédéral d'aide aux étudiants et reçoivent en contrepartie des frais d'administration. Depuis le 1^{er} août 2005, les frais administratifs versés aux provinces ont augmenté afin de mieux compenser pour le rôle qu'elles jouent dans l'administration du Programme canadien de prêts aux étudiants.

Rapport consolidé du Programme canadien de prêts aux étudiants

En août 2000, le fait marquant pour le Programme canadien de prêts aux étudiants (PCPE) a été le passage du financement à risques partagés, en place avec les institutions financières entre 1995 et juillet 2000, au financement direct des prêts aux étudiants³¹.

Ainsi, le mode de prestation de services a été repensé de sorte que les prêts aux étudiants soient directement financés. Selon les nouvelles ententes, le gouvernement du Canada finance lui-même les étudiants, et deux fournisseurs de services administrent les prêts.

Entité comptable

Le présent rapport porte uniquement sur le PCPE et non sur les activités du Ministère entourant son application. Les montants représentant les dépenses sont avant tout les dépenses législatives autorisées par la Loi canadienne sur les prêts aux étudiants et la Loi fédérale sur l'aide financière aux étudiants.

Méthode comptable

Les tableaux financiers sont préparés conformément aux principes comptables généralement reconnus au Canada, tels que reflétés dans le *Manuel de comptabilité pour le secteur public* de l'Institut Canadien des Comptables Agréés.

Conventions comptables particulières

Revenus

Deux sources de revenus sont présentées : les intérêts gagnés sur les prêts directs et les sommes recouvrées sur les prêts garantis et les reprises de prêts. Selon les conventions comptables en vigueur au gouvernement, les revenus de ces deux sources doivent être crédités au Fond du revenu consolidé. Ils n'apparaissent pas avec les dépenses dans les comptes du PCPE, mais ils sont déclarés séparément dans les états financiers de Ressources humaines et Développement social Canada (RHDS) et du gouvernement.

- **Revenus d'intérêts sur les prêts directs** — Les emprunteurs sont tenus de payer l'intérêt simple sur leurs prêts lorsqu'ils terminent leurs études à temps plein. Quand ils quittent l'école, ils peuvent opter pour un taux d'intérêt variable (taux préférentiel + 2,5 %) ou un taux fixe (taux préférentiel + 5 %). Les montants représentent uniquement l'intérêt couru sur le solde impayé des prêts directs et remboursables au gouvernement. Les emprunteurs continuent de payer directement aux prêteurs privés l'intérêt couru sur les prêts garantis ou à risques partagés. Depuis le 1^{er} août 2005, la limite hebdomadaire des prêts est passée de 165 \$ à 210 \$ par semaine de prêt. Compte tenu que les étudiants pourront bénéficier de plus d'argent, l'affectation totale des prêts va probablement grimper et, par conséquent, les revenus générés par les intérêts augmenteront sans doute.
- **Recouvrement des intérêts sur les prêts garantis** — Le gouvernement rembourse aux prêteurs privés les prêts consentis avant le 1^{er} août 1995 restés en souffrance (c.-à-d. pour lesquels les prêteurs attendent toujours un remboursement du capital et des intérêts). Les montants représentent le recouvrement du capital et des intérêts de ces prêts en souffrance.
- **Sommes récupérées sur les reprises de prêts** — En vertu des accords sur les prêts à risques partagés, le gouvernement acquerra des institutions financières participantes tous les prêts consentis entre le 1^{er} août 1995 et le 31 juillet 2000 restés en souffrance pendant au moins 12 mois après la période d'études et qui, au total, ne sont pas supérieurs à 3 % du solde mensuel moyen des prêts d'études non remboursés du prêteur. Le montant payé est établi à 5 % de la valeur du prêt en question. Les montants représentent le recouvrement du capital et des intérêts de ces prêts.

PEMS (Activités de la Partie II de l'AE)

Clients salariés ou travailleurs indépendants	Prestations non versées	Prestataires actifs servis	Résultats visés 2004-2005 ²	Résultats réels 2004-2005	Résultats visés 2005-2006 ⁵	Résultats prévus 2006-2007
			231 234	863,0 M\$	442 549	
			214 220	855,2 M\$ ³	425 033 ⁴	
			223 831	863,6 M\$	407 472	
			217 000 ⁶	850,0 M\$	425 000 ⁷	

1 Ne comprend pas les résultats des Services d'information sur l'emploi. Ce tableau inclut les données relatives aux PEMS pancanadiennes destinées aux autochtones, lesquelles n'étaient pas incluses dans cette Annexe du Plan de dépenses de l'assurance-emploi (Partie II de l'AE) de 2005-2006.

2 Les résultats ciblés pour ce qui est des clients employés et des prestations non versées pour 2004-2005 et 2005-2006 sont les totaux soumis par les régions, les provinces et les territoires. Parmi les « clients servis », on compte les prestataires actifs servis de toutes les régions et provinces et de tous les territoires ainsi que les anciens prestataires d'assurance-emploi du Québec. L'entente du Québec exige que la province rende compte des prestataires actifs et anciens prestataires, en tant que « clients servis ».

3 Représente les prestations non versées pour chaque client considéré une fois, pour éviter de compter en double les prestations non versées à des clients qui participent à la fois à des PEMS réguliers et autochtones.
4 Les clients des PEMS réguliers (409 960) comprennent les prestataires actifs de toutes les régions et provinces et de tous les territoires, ainsi que les anciens prestataires d'assurance-emploi du Québec. L'entente du Québec exige que la province rende compte des prestataires actifs et anciens prestataires, en tant que « clients servis ». Sont également compris 15 073 clients servis des PEMS pancanadiennes destinées aux autochtones.

5 Les résultats ciblés de 2005-2006 sont supérieurs aux résultats prévus correspondants qui sont publiés dans cette Annexe du Plan de dépenses de l'assurance-emploi (Partie II de l'AE) de 2005-2006 compte tenu de la bonne performance du marché du travail durant la période de référence et de l'utilisation d'une approche conservatrice de détermination des objectifs par certaines provinces.
6 Comprend les résultats des PEMS réguliers (210 000) et pancanadiennes autochtones (7 000).
7 Comprend les résultats des PEMS réguliers (410 000) et pancanadiennes autochtones (15 000).

La Partie II de la Loi sur l'assurance-emploi, qui prévoit l'établissement de PEMS, précise que ces programmes et services doivent être exécutés dans un cadre permettant d'évaluer leur succès. Le cadre EDMT prévoit aussi que ces évaluations se dérouleront par étapes, c'est-à-dire qu'il y aura une évaluation formative en période de mise en œuvre d'un programme et évaluation sommative quelque temps après, une fois que le programme est bien en marche et que la période postprogramme est assez longue pour qu'on puisse juger de l'incidence et des effets des activités.

On a mené à bien 13 évaluations formatives. Des évaluations sommatives sont complètes ou à leurs derniers stades dans six secteurs de compétence, à savoir la Colombie-Britannique, l'Alberta, le Nunavut, le Québec, l'Ontario et Terre-Neuve-et-Labrador. En Saskatchewan et au Nouveau-Brunswick, les exercices d'évaluation progressent et les résultats en sont attendus en 2006-2007. Au Yukon, à l'Île-du-Prince-Édouard et en Nouvelle-Écosse, les évaluations ont débuté et n'ont pas dépassé les premiers stades et, au Manitoba et dans les Territoires du Nord-Ouest, les évaluations sommatives en sont à l'étape de la planification.

On a diffusé les résultats généraux de ces études dans le Rapport annuel 2005 de contrôle et d'évaluation du Régime d'assurance-emploi.

Plan de l'assurance-emploi de 2006-2007			
(en millions de dollars)			
	Base	Reinvestissement	Total du Plan
Terre-Neuve-et-Labrador	58,8	73,1	131,9
Nouvelle-Écosse	50,7	30,3	81,0
Nouveau-Brunswick	50,2	42,1	92,3
Ile-du-Prince-Édouard	16,4	10,0	26,5
Québec	347,7	248,1	595,8
Ontario	342,6	184,1	526,7
Manitoba	36,8	10,2	47,0
Saskatchewan	29,1	9,9	39,0
Alberta	72,9	35,9	108,9
Territoires du Nord-Ouest	1,9	1,6	3,4
Nunavut	1,8	1,0	2,8
Colombie-Britannique	139,1	151,7	290,9
Yukon	1,9	2,0	3,9
Responsabilités pancanadiennes ^a	1 150,0	800,0	1 950,0
Fonds disponibles pour les prestations d'emploi et les mesures de soutien	1 337,9	800,0	2 137,9
^a Fonds réservés aux priorités pancanadiennes telles que les programmes pour les Autochtones, les projets sectoriels et les projets d'innovation. Ce montant est net d'une somme de 20,5 millions de dollars des fonds convertis en coûts de fonctionnement et des ressources liées à l'exercice de réaffectation des fonds à l'échelle du gouvernement.			

Pour l'année 2006-2007, le pouvoir de dépenser de la Partie II de l'AE est de 2 165,6 millions de dollars et correspond à 0,54 % de la rémunération assurable totale estimée à 401,239 millions. Voilà qui représente des dépenses inférieures au plafond de 0,8 % imposé par la Loi, lequel est évalué à 3,21 milliards de dollars en 2006-2007.

Une partie des économies de prestations de revenu de la Partie I résultant de la réforme de l'AE est comprise dans ces fonds et servira à offrir des possibilités d'emploi aux Canadiens, ainsi qu'à aider ces derniers à retourner au travail plus rapidement. La somme réinvestie a plafonné à 800 millions de dollars en 2000-2001.

Résultats prévus

On a établi un cadre de responsabilité qui respecte la responsabilité légale du ministre des Ressources humaines et du Développement social en ce qui concerne le Compte d'AE. Des indicateurs clés mesureront les résultats à court et à long terme des PEMs.

On prévoit que 425 000 prestataires actifs et anciens prestataires admissibles recevront de l'aide en 2006-2007. Ces prévisions peuvent changer en fonction des conditions qui règnent sur le marché du travail et des ententes passées avec les provinces et les territoires.

- **Développement des compétences** — Pour offrir une aide directe aux particuliers en vue de les aider à acquérir des compétences de nature générale ou spécialisée; dans les cas applicables, des contributions sont versées aux provinces ou territoires ou aux établissements d'enseignement financés par ces derniers pour supporter les coûts supplémentaires qui ne sont pas inclus dans les frais de scolarité.

- **Suppléments de rémunération ciblés** — Pour offrir des stimulants financiers qui incitent les particuliers à accepter un emploi.

Il est à noter que, parmi les prestations d'emploi mentionnées plus haut, le programme de Suppléments de rémunération ciblés n'a pas encore été mis en application.

L'admissibilité aux prestations d'emploi s'étend aux participants assurés aux termes de l'article 58 de la Loi sur l'AE, soit les prestataires actifs et les anciens prestataires (qui ont touché des prestations ordinaires au cours des trois années précédentes ou des prestations parentales ou de maternité au cours des cinq années précédentes que ont subséquemment quitté le marché de travail pour prendre soin de son ou ses enfants).

La Partie II de la loi autorise également l'adoption de mesures de soutien pour appuyer le Service national de placement. Les trois mesures prévues sont les suivantes :

- **Services d'aide à l'emploi** — Pour aider des organismes à fournir des services d'emploi aux chômeurs.
- **Partenariats du marché du travail** — Pour inciter et soutenir les employeurs, les associations d'employés ou d'employeurs et les communautés, à développer leur capacité de satisfaire aux exigences en matière de ressources humaines et à prendre des mesures de réaménagement des effectifs.

- **Recherche et innovation** — Pour trouver de meilleures façons d'aider les personnes à devenir ou rester aptes à occuper un emploi et à être des membres productifs du marché du travail.

Partie II de l'assurance-emploi – Plan de dépenses 2006–2007

Contexte

La Partie II de la *Loi sur l'assurance-emploi* (AE) oblige le gouvernement fédéral à travailler de concert avec les provinces et les territoires à l'élaboration et à la mise en œuvre de programmes actifs d'emploi qui puissent de manière plus efficace aider les chômeurs canadiens à retourner sur le marché du travail. Ces programmes portent le nom de Prestations d'emploi et mesures de soutien (PEMS).

Conformément à l'offre faite en 1996 par le gouvernement du Canada de conclure des partenariats bilatéraux avec les provinces et les territoires afin d'assurer une meilleure mise en valeur du marché du travail, des Ententes sur le développement du marché du travail (EDMT) ont été signées avec l'ensemble des provinces et des territoires. Récemment en novembre 2005, le gouvernement canadien a conclu avec l'Ontario une EDMT qui entrera en vigueur le 1^{er} janvier 2007.

Il y a deux types d'EDMT :

- Des accords de cogestion dans le cadre desquels Ressources humaines et Développement social Canada (RHDSC), autrefois Développement des ressources humaines Canada, assure avec la province ou le territoire la responsabilité conjointe de l'élaboration des PEMS tandis que l'entremise de son réseau de prestation de services. De tels accords ont été conclus avec Terre-Neuve-et-Labrador, l'Île-du-Prince-Édouard, la Colombie-Britannique et le Yukon. Un accord de partenariat stratégique qui est une forme de cogestion a aussi été signé avec la Nouvelle-Écosse.

- Des accords de transfert dans le cadre desquels la province ou le territoire assume l'entière responsabilité de l'élaboration et de la mise en œuvre de programmes actifs d'emploi semblables aux PEMS. De tels accords ont été conclus avec le Nouveau-Brunswick, le Québec, le Manitoba, la Saskatchewan, l'Alberta, les Territoires du Nord-Ouest et le Nunavut.

- Par l'intermédiaire de Service Canada, RHDSC s'occupe des PEMS en Ontario jusqu'à ce que l'accord de cession Canada-Ontario prenne effet le 1^{er} janvier 2007.

Outre les PEMS et autres programmes semblables offerts à l'échelle locale ou régionale, des activités pancanadiennes dont la portée est nationale ou plurirégionale sont exécutées par RHDSC dans toutes les provinces et les territoires dans le cadre de ses PEMS. Les activités pancanadiennes comprennent des programmes semblables aux PEMS mis en œuvre par des organisations autochtones dans le cadre des Ententes de développement des ressources humaines autochtones.

Prestations d'emploi et mesures de soutien

Les cinq prestations d'emploi sont les suivantes :

- **Subventions salariales ciblées** — Pour inciter les employeurs à recruter des personnes qu'ils ne recruteraient pas normalement s'ils ne disposaient pas d'une subvention.
- **Aide au travail indépendant** — Pour aider les particuliers à créer leur propre emploi grâce au démarrage de leur entreprise.
- **Partenariats pour la création d'emplois** — Pour offrir aux particuliers la possibilité d'acquérir une expérience de travail en vue d'améliorer leurs chances de trouver un emploi durable.

Le nombre de contrats d'assurance en vigueur au 31 mars 2006 était de 1 424 et l'âge moyen des souscripteurs était de 87,0 ans. Les rentrées et autres crédits se composent des primes et d'une somme (imputée aux dépenses) qui a été transférée du Trésor afin de permettre d'équilibrer l'actif et le passif actuariel du programme. Les paiements et autres débits se composent de prestations de décès, de rentes en règlement versées aux prestataires et d'un remboursement de primes.

Conformément aux dispositions du paragraphe 16(3) du Règlement concernant l'assurance du service civil, tout déficit sera crédité au compte du Trésor.

Fonds d'assurance de la fonction publique – Recettes et dépenses					
Dépenses	2006-2007	Dépenses réelles			(en millions de dollars)
		2003-2004	2004-2005	2005-2006	
Recettes					
Solde d'ouverture	7,5	7,1	6,6	6,3	
Recettes et autres crédits	0,2	0,0	0,1	0,1	
Paiements et autres charges	0,6	0,5	0,4	0,4	
Excédent des paiements et autres charges sur les revenus de l'exercice	0,4	0,5	0,3	0,3	
Solde de fermeture	7,1	6,6	6,3	6,0	

Compte des rentes sur l'État

Ce compte a été constitué par la *Loi relative aux rentes sur l'État*, et modifié par la *Loi sur l'augmentation du rendement des rentes sur l'État*. Cette dernière a mis fin à la vente de rentes sur l'État en 1975. Le compte est évalué sur une base actuarielle à chaque exercice, et le déficit ou l'excédent est imputé ou crédité au Trésor.

L'objectif de la *Loi relative aux rentes sur l'État* était d'encourager les Canadiens à pourvoir à leurs besoins futurs par l'achat de rentes sur l'État. La *Loi sur l'augmentation du rendement des rentes sur l'État* avait pour but d'augmenter le taux de rendement des contrats de rente sur l'État et d'augmenter la flexibilité de leurs modalités.

Les rentées et autres crédits comprennent les primes reçues, les fonds réclamés au Trésor pour les rentiers précédemment introuvables, l'intérêt gagné et tout virement requis afin de combler le déficit actuariel. Les paiements et autres débits représentent le paiement de rentes acquises, la valeur de rachat des prestations de décès, les remboursements et retraits de primes, les excédents actuariels et les postes non réclamés virés aux recettes non fiscales. Les montants reliés aux rentes non réclamées, concernant les rentiers introuvables, sont virés aux recettes non fiscales.

Au 31 mars 2006, il restait 2 400 rentes différées en vigueur dont le dernier remboursement débutera vers l'an 2030.

Compte des rentes sur l'État – Recettes et dépenses

Dépenses	(en millions de dollars)			
	2003-2004	2004-2005	2005-2006	2006-2007
Provisions actuarielles -				
Solde au début de l'exercice	437,6	405,8	377,2	347,2
Revenu	28,5	26,3	24,5	24,3
Paiements et autres charges	57,8	54,6	51,0	47,9
Excédent des paiements et autres charges sur les revenus de l'exercice	29,3	28,3	26,5	23,6
Surplus actuariel	2,5	0,3	3,5	1,6
Provisions actuarielles -				
Solde à la fin de l'exercice	405,8	377,2	347,2	321,9

Fonds d'assurance de la fonction publique

Le Fonds d'assurance de la fonction publique est un compte qui a été établi par la *Loi sur l'assurance du service civil*, afin de permettre au ministre des Finances de verser certaines prestations de décès aux fonctionnaires nommés dans des postes à durée indéterminée de tout secteur de la fonction publique, prestations établies en vertu de contrats. Aucun nouveau contrat n'a été émis depuis l'entrée en vigueur, en 1954, du Régime de prestations supplémentaires de décès pour la fonction publique et les Forces canadiennes dans le cadre de la *Loi sur la pension de la fonction publique* et de la *Loi sur la pension de retraite des Forces canadiennes*. À compter d'avril 1997, le ministère du Développement des ressources humaines a assumé la responsabilité de l'administration et de l'évaluation actuarielle de la *Loi sur l'assurance du service civil*.

Prévisions des revenus et des dépenses						
Année	Taux de cotisation	Cotisations	Revenus de placement	Dépenses	Actif au 31 déc.	Ratio Actif / dépenses
	%		\$ millions			
2010	9,90	36 128	8 982	31 868	146 795	4,37
2015	9,90	45 579	14 635	42 022	226 815	5,09
2020	9,90	57 537	21 497	56 253	332 116	5,57
2025	9,90	71 145	29 177	74 887	454 613	5,75
2030	9,90	88 011	37 958	97 015	591 404	5,81

Source : Bureau de l'actuaire en chef, Rapport actuariel (21^e) sur le Régime de pensions du Canada en date du 31 décembre 2003. Bureau du surintendant des institutions financières.

(en millions de dollars)				
	2003-2004	2004-2005	2005-2006	2006-2007
Recettes				
Cotisations	28 029	28 941	30 305	30 972
Revenu de placement				
Régime de pensions du Canada	2 682	2 070	1 093	514
Office d'investissement du RPC ¹	7 209	4 983	12 139	N/A
Fond d'investissement du RPC ²	357	(945)	(254)	N/A
Total du revenu de placement	10 248	6 108	12 978	514
Total des recettes	38 277	35 049	43 283	31 486
Dépenses				
Palements de prestations	22 607	23 763	24 977	26 132
Frais d'administration	410	386	408	398
Total des dépenses	23 017	24 149	25 385	26 530
Augmentation	15 260	10 900	17 898	4 955
Solde de fin d'année	72 511	83 411	101 309	106 264

¹ Les montants réels concernant l'Office d'investissement du RPC sont basés sur les états financiers vérifiés de l'Office. Celui-ci investit principalement dans les actions. Les revenus des placements sont déterminés principalement par les changements dans la valeur marchande des placements. Il est difficile de prévoir la valeur marchande future, donc les revenus des placements ne sont pas disponibles pour l'année 2006-2007.

² Le Fond d'investissement du RPC est composé d'obligations provinciales, territoriales et fédérales. Depuis le 31 mars 2004, ces obligations sont évaluées à la valeur marchande. Les revenus provenant de ce Fonds sont composés des intérêts produits par les obligations ainsi que des changements dans la valeur marchande des placements. Les revenus d'intérêts du Fonds d'investissement sont présentés sous la rubrique "Régime de pensions du Canada" de la présente section. Il est difficile de prévoir la valeur marchande future, donc les revenus des placements ne sont pas disponibles pour l'année 2006-2007.

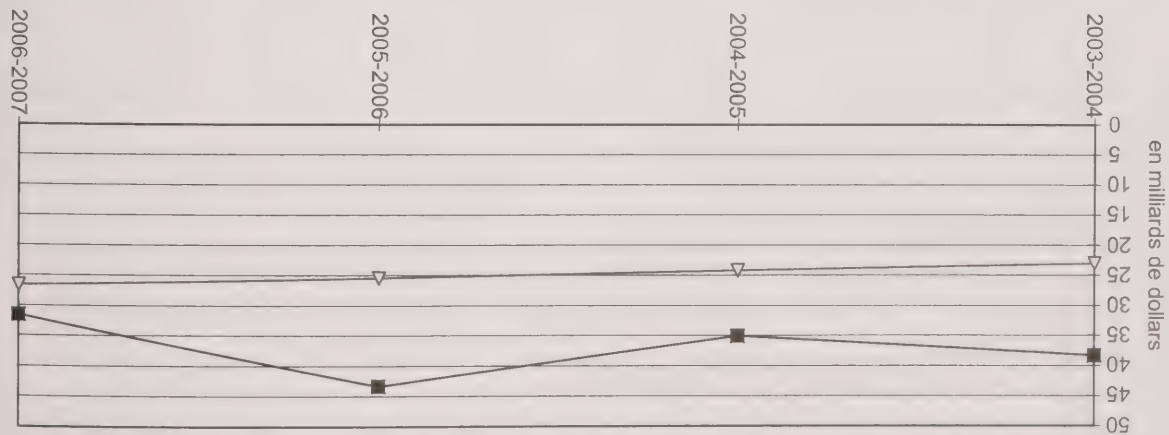
Prévisions à long terme

La législation régissant le RPC prévoit l'établissement d'un barème des taux de cotisation et un examen réalisé tous les trois ans par le ministre fédéral et les ministres provinciaux des Finances. Cet examen permet de déterminer s'il est nécessaire de rectifier le barème. Le cas échéant, les rajustements sont mis en oeuvre conformément à la loi ou à une entente conclue entre les ministres des Finances ou automatiquement selon une formule qui garantit que le taux de cotisation suffira à assurer la viabilité du Régime en situation de vieillissement de la population. Les modifications au barème des taux ou à la formule de rajustement automatique doivent être approuvées par au moins les deux tiers des provinces comptant au moins les deux tiers de la population de l'ensemble des provinces.

Le tableau qui suit indique les prévisions des revenus et des dépenses qui auront une incidence sur le RPC pendant la période allant du 31 décembre 2005 au 31 décembre 2030, selon le 21^e Rapport actuariel sur le Régime de pensions du Canada publié par le Bureau du surintendant des institutions financières le 31 décembre 2003. Le ratio actif / dépenses reflète la valeur de l'actif en fin d'exercice rapportée à la valeur des dépenses.

Tendances des revenus et des dépenses du RPC ainsi que sa situation entre 2003-2004 et 2006-2007

	2003-2004	2004-2005	2005-2006	2006-2007
Total des dépenses	23,0	24,1	25,4	26,5
Total des recettes	38,3	35,0	43,3	31,5



Responsabilité financière

Le RPC et ses ressources se répartissent en trois composantes :

- **Le Compte du RPC** sert à enregistrer les cotisations, l'intérêt, les pensions et les prestations ainsi que les frais d'administration du Régime. En septembre 2004, la réserve de fonctionnement²⁹ du compte du RPC a commencé à être transférée à l'Office d'investissement du RPC. Le transfert doit durer 12 mois et se terminer en août 2005. En outre, le RPC transfère chaque semaine à l'Office d'investissement tout montant excédentaire qui n'est pas nécessaire pour payer les prestations et les dépenses du RPC, selon les prévisions hebdomadaires communiquées à cet organisme par le personnel du service de comptabilité du Régime.

- **Le Fonds d'investissement du RPC** est là pour enregistrer les investissements dans les titres des provinces, des territoires et du Canada. Conformément au projet de loi C-3 adopté en avril 2004, le Fonds d'investissement du RPC sera graduellement transféré à l'Office d'investissement sur une période de trois ans à compter du 1^{er} mai 2004.

- **L'Office d'investissement du Régime de pensions du Canada** est un organisme indépendant établi par une loi du Parlement en décembre 1997. Il a commencé à être exploité en mars 1999 et sa raison d'être est d'aider le RPC à atteindre un financement équilibré en plaçant les fonds dont le RPC n'a pas besoin pour le service courant des pensions et en accumulant de l'intérêt sur les fonds transférés du Compte du RPC³⁰. L'Office doit rendre compte de ses opérations au public et aux gouvernements dans des rapports réguliers. Il est soumis à des règles semblables à celles qui régissent les investissements des autres régimes de retraite au Canada.

Sommaire financier

On prévoit que les prestations atteindront 26,1 milliards de dollars en 2006-2007, soit une hausse de 1,2 milliard de dollars, ou 4,6 %, par rapport à 2005-2006, d'après des prévisions relatives à la population des prestataires et à la moyenne des prestations. En 2006-2007, on s'attend à une croissance nette de 3,0 % du nombre de prestataires et à une croissance nette de 1,7 % de la moyenne des prestations.

Le tableau ci-dessous résume les résultats financiers du RPC entre 2003-2004 et 2006-2007. En 2002-2003, le gouvernement du Canada a délaissé la méthode de comptabilité d'exercice modifiée pour adopter la méthode de comptabilité d'exercice intégrale. Cette nouvelle méthode a été appliquée rétroactivement et les états financiers ont été retraités en conséquence.

De plus, les obligations provinciales, territoriales et fédérales, autrefois évaluées au prix coûtant, le sont depuis 2003-2004 à la valeur marchande. Ce changement a été appliqué rétroactivement et les états financiers ont été retraités en conséquence.

On prévoit que le RPC enregistrera une hausse de près de 18 milliards de dollars, ce qui portera le solde cumulé à plus de 106 milliards de dollars d'ici le 31 mars 2007. À l'heure actuelle, le RPC dispose d'une réserve équivalant à plus de 3,5 fois ses prestations et, en 2021, cette supériorité devrait être d'environ 5,6 fois.

Le graphique qui suit résume les tendances des revenus et des dépenses du RPC ainsi que sa situation entre 2002-2003 et 2006-2007.

²⁹ La réserve est formée d'un montant équivalant à trois mois de prestations et de dépenses du RPC. On peut se renseigner sur l'Office d'investissement du Régime de pensions du Canada à l'adresse <http://www.cppib.ca/fr>

Revenus

Le RPC est financé par les cotisations obligatoires des salariés, des employeurs et des travailleurs autonomes ainsi que par des revenus de placement. Les cotisations sont payées sur la partie de la rémunération du cotisant qui se situe entre le minimum déterminé (exemption de base de l'année) et le maximum déterminé (maximum des gains ouvrant droit à pension pour l'année). Le minimum est constant à 3 500 \$, tandis que le maximum dépend du taux moyen de rémunération dans l'industrie au Canada et fait l'objet d'un rajustement annuel. Les personnes qui touchent des prestations de retraite ou d'invalidité du RPC ou qui atteignent l'âge de 70 ans ne peuvent plus cotiser au Régime. Les dépenses de ce dernier comprennent les prestations à proprement parler et les frais d'administration du programme.

Quand il a été mis en oeuvre en 1966, le RPC était un régime par répartition disposant d'une petite réserve. Cela voulait dire que les prestations d'une génération seraient largement payées par les cotisations des générations suivantes. Toutefois, l'évolution de la population et de l'économie et les modifications apportées aux prestations dans les trente années suivantes se sont traduites par des coûts sensiblement plus élevés. Il devint évident qu'il n'était plus possible de continuer à financer le Régime par répartition, car cela imposerait un lourd fardeau financier aux Canadiens et aux Canadiennes faisant partie de la population active durant ces années. Les administrateurs ont plutôt choisi de modifier le mode de financement du Régime et opté pour un financement hybride par répartition et par capitalisation intégrale, mode selon lequel chaque génération paie ses propres prestations.

En 1998, les autorités fédérales et provinciales ont adopté un mode de financement dit « équilibré » en vertu duquel le taux de cotisation allait progressivement passer de 5,6 % en 1996 à 9,9 % en 2003 pour demeurer à ce niveau par la suite. Le Rapport actuariel (21^e) du Bureau du surintendant des institutions financières sur la viabilité du Régime de pensions du Canada indique que le taux de cotisation de régime permanent est de 9,8 % des gains cotisables. Ce taux représente le taux le plus faible pouvant être appliqué pour assurer la viabilité du Régime sans qu'une augmentation supplémentaire s'impose; il se situe à 0,1 % en deçà du taux de cotisation prévu par la loi. En appliquant le taux de cotisation de 9,9 % prévu par la loi, l'actif devrait nettement augmenter au cours des 17 prochaines années. Le ratio de l'actif aux dépenses de l'année suivante passe de 3,1 en 2004 à 5,6 en 2021²⁸.

Ainsi, entre 2001 et 2020, les cotisations dépasseront les prestations versées chaque année. Les fonds qui ne sont pas immédiatement nécessaires au paiement des prestations sont confiés à l'Office d'investissement du RPC, qui les place sur les marchés financiers. Avec le temps, il se constituera une réserve suffisante pour aider à acquitter les coûts croissants auxquels on peut s'attendre, à mesure que le nombre de baby-boomers qui prendront leur retraite augmentera.

Grâce à ce mode de financement diversifié, le système canadien de revenu de retraite est moins vulnérable devant la conjoncture économique et l'évolution de la population et il constitue un modèle d'avant-garde pour la gestion des régimes publics de retraite dans le monde.

Revenu de placement : Les investissements sur le marché des actions, dans l'immobilier et sur le marché monétaire produisent des revenus, auxquels s'ajoutent les intérêts obligataires.

²⁸ Bureau de l'actuaire en chef, Rapport actuariel sur le Régime de pensions du Canada en date du 31 décembre 2003. Ottawa : Bureau du surintendant des institutions financières Canada, 2004. p. 10.

RPC – Frais d'administration par ministère

	(millions de dollars)			
Développement des ressources humaines Canada	2003-2004	2004-2005	2005-2006	2006-2007
Administration du Régime, opérations, dossiers et locaux	266,4	-		
Développement social Canada		224,0	240,5	232,0
Ressources humaines et Développement des compétences Canada		6,6	15,3	14,7
Services en personne aux demandeurs et aux prestataires				
Compte de l'assurance-emploi – Remboursement des numéros d'assurance sociale et la tenue du fichier central	1,7	2,7	3,3	3,0
Secrétariat du Conseil du Trésor				
Primes d'assurance et cotisations recouvrables aux régimes d'avantages sociaux des salariés	40,8	39,0	30,1	27,8
Travaux publics et Services gouvernementaux Canada				
Emission des chèques, services d'information	14,7	15,8	16,1	16,2
Gendarmerie royale du Canada				
Enquêtes en cas de contravention			0,3	0,3
Agence du revenu du Canada	85,3	96,5	100,8	101,7
Bureau du Surintendant des institutions financières	1,0	1,3	1,4	1,7
Services actuariels				
Finances	0,4	0,4	0,4	0,4
Services de placement	410,3	386,4	408,3	397,8
TOTAL				

Prestations au survivant : Le survivant d'un cotisant, conjoint de droit ou de fait, peut avoir droit à une pension mensuelle si le cotisant a versé des cotisations pendant une période minimale et si, au moment de son décès, ce conjoint est âgé d'au moins 35 ans ou, s'il n'a pas cet âge, qu'il a des enfants à charge ou qu'il est handicapé. En cas de remariage du conjoint de droit ou de fait survivant, les paiements se poursuivent. Des prestations mensuelles sont également payables au nom des enfants des cotisants au RPC qui sont décédés. Le montant est uniforme et payable jusqu'à ce que l'enfant atteigne l'âge de 18 ans ou de 25 ans s'il fréquente l'école ou l'université à plein temps. Une prestation forfaitaire est payable à la succession du cotisant décédé, pourvu que les cotisations versées par celui-ci soient suffisantes.

Détermination du taux de prestation

Les prestations du RPC se calculent généralement d'après la rémunération. En janvier de chaque année, elles sont rajustées en fonction du coût moyen de la vie mesuré par l'indice des prix à la consommation. Certaines prestations comme les prestations aux enfants ne sont pas fondées sur les gains. Il s'agit plutôt d'un montant fixe. Les prestations d'invalidité et les prestations au survivant se fondent en partie sur la rémunération et en partie sur un tarif fixe ou un taux uniforme.

Prestations du RPC par catégorie et par type				
Dépenses	Prévisions	Chiffres réels	(millions of dollars)	
			2003-2004	2006-2007
Pensions de retraite			15 852	16 795
			18 601	17 664
Pensions d'invalidité				
Pensions d'invalidité				
Prestations pour enfant de cotisant			2 844	2 921
invalides			257	268
Total des prestations d'invalidité				
Prestations de conjoint de droit ou de fait			3 187	3 327
Prestations d'orphelin			213	215
Prestations de décès			254	248
Total des prestations de survivant				
			3 654	3 790
			4 055	3 940
TOTAL				
			22 607	23 763
			26 132	24 977

Frais d'administration

Ressources humaines et Développement social Canada, Finances Canada, l'Agence du revenu du Canada, Travaux publics et Services gouvernementaux Canada, la Gendarmerie royale du Canada et le Bureau du surintendant des institutions financières fournissent des services aux fins de l'administration du RPC et de la distribution des prestations.

Les frais engagés par ces ministères et organismes pour l'administration du Régime peuvent être récupérés du RPC, conformément aux principes d'établissement des coûts approuvés par le Conseil du Trésor. Pour l'essentiel, les frais doivent, selon ces principes, avoir été engagés en raison de responsabilités concernant le RPC et ils doivent être identifiables. Les frais d'administration pour l'exercice 2006-2007 sont estimés à 397,8 millions de dollars, soit une baisse de 2,5 % par rapport aux prévisions de 2005-2006.

Le personnel chargé du service des prestations et les processus qu'il met en oeuvre à cette fin sont extrêmement efficaces. En 2006-2007, les dépenses totales d'administration et de distribution des prestations du RPC représentent approximativement 1,5 % du total prévu des prestations.

Régime de pensions du Canada

Description

Le Régime de pensions du Canada (RPC) est un programme fédéral-provincial conjoint en vigueur dans tout le Canada, sauf au Québec, qui dispose d'un régime comparable. Le RPC offre diverses prestations axées sur les changements qui surviennent dans la vie des gens. Mieux connu pour ses prestations de retraite, le RPC offre également des prestations au survivant et aux enfants d'un cotisant, d'autres prestations aux personnes handicapées et à leurs enfants, et un montant forfaitaire maximal de 2 500 \$ en cas de décès.

Comme il s'agit d'un régime contributif, les cotisants sont les salariés et les travailleurs autonomes de 18 à 70 ans ayant un revenu d'au moins 3 500 \$ au cours d'une année civile. Les prestations sont calculées d'après le montant et la durée des cotisations au RPC. Elles ne sont pas payées automatiquement. Il faut les demander et faire la preuve de son admissibilité.

Environ 12 millions de Canadiens et de Canadiennes de plus de 18 ans versent des cotisations au RPC chaque année et environ 4 millions recevront des prestations en 2006-2007.

Les prestations

Pensions de retraite : Les cotisants peuvent commencer à toucher une pension de retraite du RPC dès l'âge de 60 ans ou attendre d'avoir atteint 70 ans. Les demandeurs âgés de 60 à 65 ans doivent avoir cessé de travailler ou toucher un salaire inférieur à un niveau déterminé lorsqu'ils commencent à recevoir une pension de retraite. Dès qu'il a commencé à recevoir sa pension du RPC, le bénéficiaire peut gagner un salaire, peu importe le montant, sans que sa pension en soit influencée. Il ne verse toutefois plus de cotisations sur sa rémunération ultérieure. Les cotisants âgés de plus de 65 ans ne sont pas tenus d'avoir cessé de travailler pour être admissibles.

La pension de chaque cotisant dépend du montant et de la durée de ses cotisations et de l'âge auquel il commence à toucher des prestations. Les pensions sont rajustées de 0,5 % par mois avant ou après le seuil de 65 ans à partir du moment où le bénéficiaire commence à toucher sa pension. Les cotisants qui commencent à toucher une pension de retraite à l'âge de 60 ans reçoivent 70 % du montant habituellement versé aux prestataires âgés de 65 ans, alors que les personnes qui attendent d'avoir atteint 70 ans reçoivent 130 % du montant payable aux personnes de 65 ans.

Les époux ou les conjoints de fait qui sont âgés d'au moins 60 ans ont le droit de partager les prestations de retraite accumulées pendant leur période de cohabitation aussi longtemps que les intéressés demeurent ensemble, ce qui peut leur permettre de réaliser des économies d'impôt. Si un seul époux a cotisé au RPC, la pension peut être partagée entre les deux. Le montant global des prestations n'augmente ni ne diminue en cas de partage de la pension.

Prestations d'invalidité : Des prestations d'invalidité sont payables aux cotisants qui satisfont aux exigences minimales en matière de cotisations et dont l'invalidité est « grave et prolongée », selon la définition de la loi. Une invalidité de cette nature les empêcherait d'occuper régulièrement quelque poste que ce soit et de toucher un revenu appréciable durant une période prolongée. Par des réévaluations périodiques, on veille à ce que les prestations ne soient versées qu'aux prestataires admissibles. Les prestataires qui tentent de retourner sur le marché du travail pour accepter un emploi rémunéré ont aussi droit à du soutien. Une prestation mensuelle uniforme peut également être versée à l'enfant du bénéficiaire d'une prestation d'invalidité du RPC, pourvu qu'il ait moins de 18 ans ou moins de 25 ans s'il fréquente l'école à plein temps. En février 2006, un peu plus de 299 000 bénéficiaires et 88 000 enfants recevaient ces prestations chaque mois.

Les dépenses d'administration de l'assurance-emploi de 1 624 millions de dollars représentent les exigences initiales pour 2006-2007, qui sont légèrement inférieures à l'autorisation finale de dépenser pour 2005-2006.

Note : En raison de l'arrondissement, l'addition des montants peut ne pas égaier les totaux.

Coûts d'administration			
(en millions de dollars)			
Dépenses	Prévisions	Dépenses réelles	Total
2006-2007	2005-2006	2004-2005	2003-2004
			Fédéral
			Prestations de revenu de l'AE
		573	540
			Politiques, programmes
		458	527
			et prestation de services
		295	272
			Services ministériels
		57	36
			Programmes d'emploi
		59	44
			Compétences en milieu de travail
		16	17
			Apprentissage
		1 458	1 436
	1 553		Sous-total
1 532	92	92	Provincial
100			Recouvrement
(8)	(7)	(8)	Total
1 624	1 638	1 542	

Intérêt gagné

L'article 76 de la Loi énonce que le ministre des Finances peut autoriser, selon les modalités et les taux qu'il peut fixer, le versement d'intérêts sur le solde créditeur du Compte d'assurance-emploi et ces intérêts, qui représentent 90 % du taux mensuel moyen sur les bons du Trésor à échéance de trois mois, sont portés au crédit du Compte et au débit du Trésor. L'intérêt est calculé mensuellement, d'après la moyenne de 30 jours du solde quotidien dans le compte.

Conformément à un règlement du Conseil du Trésor, on perçoit, depuis le 1^{er} juillet 2002, des intérêts sur les comptes débiteurs en souffrance par fausse déclaration. Le taux d'intérêt utilisé dans ce calcul correspond à la moyenne du taux d'escompte de la Banque du Canada pour le mois précédent, plus 3 %.

Intérêt gagné

Dépenses				
Prévisions	2005-2006	Dépenses réelles		2006-2007
		2004-2005	2003-2004	
(en millions de dollars)				
Sources				
Solde du compte	1 324	968	1 096	1 934
Compte à recevoir	28	27	29	34
Total	1 352	995	1 125	1 968

On s'attend à ce que l'intérêt gagné atteigne 2,0 milliard de dollars à cause de la montée des taux d'intérêt et de la hausse de l'excédent en valeur cumulative.

Frais d'administration

L'article 77 de la Loi sur l'assurance-emploi précise que les frais d'administration de la Loi doivent être imputés au Compte d'assurance-emploi.

La ministre des Ressources humaines et du Développement social doit rendre compte du Régime d'assurance-emploi au Parlement. Toutefois, la responsabilité de l'administration du régime est partagée avec l'Agence du revenu du Canada (ARC) qui perçoit les cotisations et les remboursements de prestations et prend les décisions d'assurabilité selon la Loi. Le Secrétaire du Conseil du Trésor et Justice Canada fournissent des services à l'appui de la gestion et de l'exécution des programmes en application de la Loi.

Les dépenses engagées par les gouvernements provinciaux et territoriaux pour administrer les prestations d'emploi et les mesures de soutien en vertu des Ententes sur le développement du marché du travail sont également débitées du Compte d'assurance-emploi.

Maximum de la rémunération annuelle assurable (MRAA) : Les cotisations sont payées sur tous les revenus d'emploi des salariés assurés jusqu'au maximum de la rémunération annuelle assurable. L'article 4 de la Loi stipule que le MRAA s'établira à 39 000 \$ jusqu'à ce que la valeur de la moyenne hebdomadaire des 12 mois qui se terminent en juin de la première année précédente, multipliée par le ratio entre cette même moyenne et la moyenne correspondante de la deuxième année précédente (ratio multiplié par 52 et arrondi au 100 \$ le plus bas), excède le seuil²⁶.

Réduction des cotisations : L'employeur offrant un régime approuvé d'assurance-salaire est admissible à une réduction des cotisations. Il est tenu de faire profiter ses employés de cette réduction²⁷.

Ajoutons que, par suite de la mise en application du régime québécois d'assurance-parentale, le taux de cotisation applicable aux salariés de cette province baissera à 1,53 % en 2006. Le taux correspondant des employeurs est de 2,14 %. On estime que, cette année-là, les cotisations perçues au Québec diminueront de 794 millions de dollars.

Remboursement de cotisations :

- Le salarié dont la rémunération annuelle est de 2 000 \$ ou moins peut recevoir un remboursement de ses cotisations à l'assurance-emploi par l'entremise de l'impôt sur le revenu.

Les cotisations à l'assurance-emploi sont remboursées aux salariés lorsque leur rémunération annuelle dépasse le maximum de la rémunération annuelle assurable.

Facteurs relatifs aux recettes provenant des cotisations

Exercice	(en millions de dollars)				Recettes des cotisations (M\$)	Total de la rémunération assurable (M\$)	Taux de cotisation de l'employé (en % de la rémunération assurable)	Maximum de la rémunération assurable (en dollars)	Réduction de la cotisation (M\$) QPIP	Remboursement de la cotisation (M\$)	Employé (nouvelles embauches/ embauche des jeunes)
	Recettes	Prévisions	Dépenses réelles	2003-2004	2004-2005	2005-2006	2006-2007	prévues	Change	2006	2007
2003	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2004	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2005	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2006	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2007	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2008	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2009	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2010	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2011	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2012	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2013	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2014	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2015	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2016	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2017	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2018	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2019	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2020	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2021	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2022	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2023	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2024	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2025	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2026	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2027	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2028	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2029	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2030	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2031	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2032	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2033	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2034	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2035	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2036	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2037	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2038	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2039	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2040	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2041	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2042	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2043	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2044	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2045	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2046	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2047	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2048	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2049	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2050	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2051	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2052	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2053	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2054	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2055	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2056	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2057	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2058	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2059	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2060	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2061	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2062	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2063	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2064	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2065	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2066	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2067	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2068	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2069	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2070	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2071	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2072	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2073	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2074	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2075	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2076	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2077	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2078	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2079	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2080	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2081	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2082	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2083	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2084	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2085	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2086	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2087	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007
2088	17 900	17 655	384 426	372 373	393 479	401 239	16 621	2,0%	(1,7%)	2006	2007



Les dépenses prévues pour les prestations d'emploi et les mesures de soutien en 2006-2007 se montent à 2,138 milliards, soit 0,5 % du la rémunération assurable totale estimée à 401 239 millions. Cela représente un niveau de dépenses moins élevé que le plafond de 0,8 % imposé par l'article 78 de la Loi.

Prestations d'emploi et mesures de soutien

Dépenses prévues ^a	Dépenses réelles			Total des programmes de RHDC	Transferts aux provinces et territoires	Total
	Prévisions	2005-2006	2004-2005	2003-2004	2004-2005	2006-2007
Partenariats pour la création d'emploi		54	71	74		
Développement des compétences		410	429	355		
Travail indépendant		107	115	96		
Subventions salariales ciblées		42	48	45		
Aide à l'emploi		322	324	334		
Partenariats du marché du travail		177	173	192		
Recherche et innovation		15	17	27		
Total des programmes de RHDC	1 249	1 127	1 176	1 124	894	889
Total	2 138	2 016	2 067	2 018		

a. La ventilation par élément n'est pas disponible, parce que les dépenses seront effectuées en fonction des besoins locaux en matière de main-d'œuvre. La répartition par province et territoire figure à la section intitulée Assurance-emploi – Partie II – Plan de dépenses de 2006-2007.

Note :

En raison de l'arrondissement, l'addition des montants peut ne pas égaier les totaux.

Cotisations

Les salariés assurés et leurs employeurs versent des cotisations qui couvrent les coûts du régime pendant un cycle économique selon le taux de cotisation annuel fixé et la rémunération assurable des employés. L'explication des facteurs ayant une incidence sur les cotisations est donnée ci-dessous :

Détermination du taux de cotisation : Dans son budget de 2005, le gouvernement du Canada a instauré un nouveau mécanisme permanent d'établissement du taux de cotisation à l'assurance-emploi et a confié à la Commission de l'assurance-emploi le pouvoir législatif de fixer ces taux. Dans le nouveau cadre, l'actuaire en chef a l'obligation de calculer annuellement, dans un exercice prospectif, un taux estimatif d'équilibre pour l'année qui vient en se fondant sur les dernières prévisions établies par le ministre des Finances pour les variables économiques d'intérêt. Dans un tel exercice prospectif, les excédents, les déficits et les intérêts fictifs portés au crédit du Compte d'assurance-emploi n'entrent pas dans le calcul du taux de cotisation d'équilibre. Pour 2006, la Commission fixe le taux applicable aux salariés à 1,87 % de la rémunération assurable comparativement à 1,95 % en 2005. Le taux applicable aux employeurs s'établira à 2,62 %; c'est moins que le taux actuel de 2,73 %. La réduction de 2006 est la douzième de suite depuis 1994, période où le taux applicable aux salariés était de 3,07 %.

Prévisions d'emploi et mesures de soutien

Les **prévisions d'emploi** comprennent le Développement des compétences, les Partenariats pour la création d'emplois, le Travail indépendant et les Subventions salariales ciblées.

Quant aux **mesures de soutien**, elles comprennent les Services d'aide à l'emploi, les Partenariats du marché du travail ainsi que la Recherche et l'innovation.

La partie II de la Loi autorise aussi le gouvernement du Canada à effectuer des paiements aux gouvernements provinciaux et territoriaux pour qu'ils mettent en œuvre des programmes semblables aux prestations d'emploi et aux mesures de soutien. La contribution fédérale prévue pour 2006-2007 est fixée à 889 millions de dollars conformément aux Ententes sur le développement du marché du travail avec les provinces et les territoires (Nouveau-Brunswick, Québec, Ontario, Manitoba, Saskatchewan, Alberta, territoires du Nord-Ouest et Nunavut). Cette somme ne comprend pas le transfert à l'Ontario le 1^{er} janvier 2007. Le montant de ce transfert et des charges administratives afférentes est actuellement négocifié.

Facteurs ayant une incidence sur les prestations de revenu					
Dépenses	Dépenses prévues	Dépenses réelles	Prévisions	Taux de prestations (\$/semaine)	Moyenne mensuelle de bénéficiaires (en millier)
2007-2008	2006-2007	2005-2006	2004-2005	2003-2004	Diff. en %
13 052	12 402	12 681	848	295	0,3%
764	764	788	819	299	(3,0%)
312	312	302	302	302	3,4%

Note : En raison de l'arrondissement, l'addition des montants peut ne pas égaier les totaux.

[illegible]

Lorsque le revenu annuel net des prestataires d'assurance-emploi est supérieur à 1,25 fois le maximum de la rémunération annuelle assurable (seuil de remboursement), il faut que les intéressés remboursent le moins de 30 % (taux de remboursement) du revenu net en excédent ou de 30 % du montant total de prestations versées autres que les prestations spéciales. Cette mesure ne s'applique pas aux prestataires qui reçoivent pour la première fois des prestations ordinaires ou des prestations de pêcheur.

Remboursement des prestations

Projets pilotes

Le projet pilote de la prolongation des prestations d'assurance-emploi majeure de cinq semaines le droit à prestations ordinaires dans les régions de fort chômage jusqu'à un maximum de 45 semaines de prestations s'il s'agit de prestations établies dans la période commençant le 1^{er} juin 2006 et se terminant dans la semaine du 9 décembre 2007. Il remplace un projet pilote qui, dans ces mêmes régions de fort chômage, assurait cinq semaines supplémentaires de prestations si ces prestations étaient établies dans la période commençant le 6 juin 2004 et se terminant dans la semaine du 4 juin 2006. C'est là une mesure provisoire et le gouvernement conserve comme priorité d'aider les Canadiens à prendre leur place sur le marché du travail.

Trois projets pilotes ont été entrepris dans des régions de fort chômage (taux de 10 % et plus). À compter du 30 octobre 2005, les prestations d'assurance-emploi se calculeront dans les régions visées en fonction des 14 meilleures semaines de rémunération parmi les 52 semaines précédant la demande de prestations. À partir du 1^{er} décembre 2005, les gens qui arrivent sur le marché du travail ou y retournent après une absence prolongée seront admissibles aux prestations ordinaires après un minimum de 840 heures travaillées (au lieu de 910); la valeur seuil d'heures de travail en cours de période de prestations pour le calcul des paiements sera majorée de 75 \$ ou de 40 % de la prestation hebdomadaire (les chiffres correspondants étaient auparavant de 50 \$ ou de 25 % de la prestation hebdomadaire).

Prestations spéciales

Pour recevoir les prestations de maladie ou de maternité, les prestations parentales ou les prestations de compassion, il faut travailler 600 heures. Tous les prestataires peuvent recevoir des prestations de maladie jusqu'à concurrence de 15 semaines. Des prestations parentales de 35 semaines sont disponibles pour les parents biologiques et adoptifs en plus des 15 semaines de prestations de maternité dont peuvent disposer les mères biologiques. Les prestations de compassion peuvent être versées pendant six semaines aux personnes qui prodiguent des soins à un membre de la famille qui est gravement malade ou sur le point de mourir (frères et sœurs, grands-parents, petits-enfants, parents par alliance, oncles et tantes, neveux et nièces, parents adoptifs, pupilles et tuteurs, personnes gravement malades qui considèrent le prestataire comme un membre de la famille).

Le 1^{er} mars 2005, les gouvernements du Canada et du Québec ont conclu une entente définitive au sujet du régime québécois d'assurance parentale. À partir de janvier 2006, les résidents du Québec obtiendront leurs prestations de maternité et leurs prestations parentales des autorités provinciales. Le gouvernement québécois remboursera toutes les prestations versées par les autorités fédérales au Québec dans ces deux régimes à l'égard des demandes établies avant 2006 mais réglées après janvier de la même année.

Travail partagé

Les prestataires liés par des ententes de travail partagé peuvent recevoir des prestations. Ces ententes conclues par RHDSC, les salariés et les employeurs visent à éviter les mises à pied temporaires en combinant des prestations partielles d'assurance-emploi et des semaines de travail réduites. Elles durent normalement de 6 à 26 semaines.

Prestations de pêcheur

La durée et le montant des prestations versées aux pêcheurs dépendent du revenu tiré de la pêche et du taux de chômage régional. Tous les pêcheurs sont assujettis à une période maximale d'admissibilité de 31 semaines; ils peuvent être admis à 26 semaines de prestations au maximum. Les pêcheurs d'été peuvent recevoir des prestations entre le 1^{er} octobre et le 15 juin et ceux qui pratiquent la pêche hivernale entre le 1^{er} avril et le 15 décembre. Le taux de prestation de pêcheur est déterminé à l'aide d'un dénominateur minimal lié au taux de chômage régional.

Versement de prestations

On s'attend à ce qu'en 2006-2007 les prestations versées atteignent 14,6 milliards de dollars, soit 12,4 milliards pour les prestations de revenu et 2,1 milliards pour les prestations d'emploi et les mesures de soutien.

Prestations de revenu

Les prestations de revenu de l'assurance-emploi comprennent les prestations ordinaires, spéciales, de travail partagé et de pêcheur²⁵. Les principaux aspects des prestations se décrivent comme suit :

Prestations ordinaires

Nombre d'heures de travail requis pour l'admissibilité aux prestations

La plupart des prestataires doivent avoir accumulé de 420 à 700 heures de travail durant leur période d'admissibilité et ce, qu'ils occupent un emploi à temps plein ou à temps partiel, ou peu importe s'ils travaillent pour le compte d'un ou de plusieurs employeurs. Le nombre exact d'heures requis est appelé « norme variable d'admissibilité ». Il est déterminé selon le taux de chômage caractérisant la région où vit le prestataire au moment où il fait sa demande de prestations. Plus le taux de chômage est élevé, plus le nombre d'heures requis est bas.

Les personnes qui viennent tout juste d'entrer sur le marché du travail (nouveaux venus) et celles qui y reviennent après une absence (rentants sur le marché du travail) doivent avoir accompli 910 heures de travail. Par contre, celles qui ont travaillé au moins 490 heures au cours des 12 mois précédant leur dernière période d'admissibilité ou qui ont reçu au moins une semaine de prestations de maternité ou de prestations parentales au cours des quatre années précédant cette période sont admissibles l'année suivante conformément aux règles habituelles.

Détermination du taux des prestations et de l'admissibilité

Les prestataires ordinaires peuvent recevoir des prestations pendant une durée de 14 à 45 semaines selon le nombre d'heures d'emploi assurables et le taux de chômage caractéristique de leur région. Les prestataires ont droit à des prestations hebdomadaires équivalant à 55 % de la moyenne de leur rémunération assurée des 26 dernières semaines de travail. La rémunération assurée moyenne est calculée à partir du nombre réel de semaines de travail, mais elle est assujettie à un dénominateur minimal qui est lié au taux de chômage régional.

Les prestataires dont le revenu familial était de moins de 25 921 \$ et qui sont admissibles à la Prestation fiscale canadienne pour enfants (PFCE) reçoivent un supplément familial établi d'après :

- le revenu familial net;
- le nombre d'enfants à charge;
- l'âge de ces enfants.

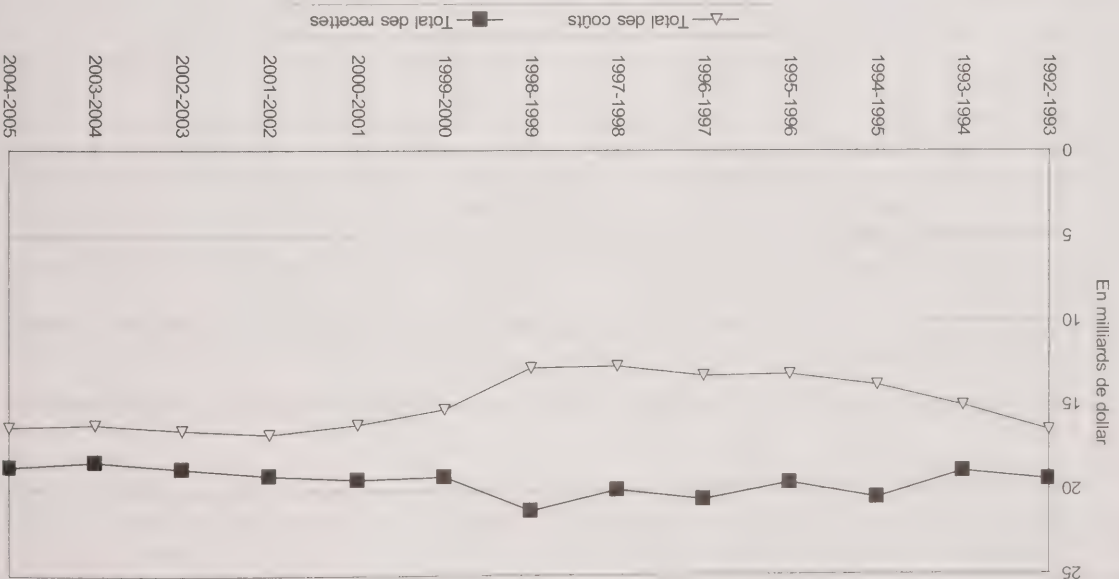
Les prestataires qui reçoivent un supplément familial peuvent voir leur taux de prestation augmenter pour atteindre un maximum de 80 % de la rémunération moyenne hebdomadaire assurée jusqu'à concurrence de la prestation hebdomadaire maximale de 413 \$.

²⁵ Pour plus de détails, visiter le site Web de l'assurance-emploi à l'adresse <http://www.rhdcc.gc.ca/fr/passereelles/topiques/tyt-gxt.shtml>

- Les recettes tirées des cotisations devraient passer à 16,6 milliards de dollars, puisque la baisse du taux de cotisation à 1,87 % en 2006 est partiellement compensée par la hausse du nombre d'emplois et l'élévation des salaires.

La figure qui suit résume les tendances des coûts et des recettes du Compte d'assurance-emploi de 1994-1995 à 2006-2007.

COMPTE D'ASSURANCE-EMPLOI - TENDANCE DES COÛTS ET DES RECETTES



Le tableau ci-dessous présente un sommaire des données financières relatives au Compte d'assurance-emploi de 2003-2004 à 2006-2007.

Compte de l'assurance-emploi - Sommaire

(en millions de dollars)				
Dépenses	2003-2004	Dépenses réelles	Prévisions	Dépenses prévues
Prestations de revenu	15 070	14 748	14 418	14 580
Coûts administratifs	1 521	1 542	1 638	1 624
Créances douteuses	60	95	56	57
Total des coûts	16 651	16 385	16 112	16 261
Recettes tirées des cotisations	17 900	17 655	16 917	16 621
Pénalités	47	51	50	54
Intérêts	1 125	995	1 352	1 968
Total des recettes	19 072	18 701	18 319	18 643
Surplus	2 421	2 316	2 207	2 382
Annuel	46 233	48 549	50 756	53 139
Cumulatif				

Notes :

Des cotisations d'assurance-emploi figurant dans les états financiers sommaires du gouvernement du Canada est exclue la quote-part de celui-ci à titre d'employeur.

En raison de l'arrondissement, l'addition des montants peut ne pas égaier les totaux.

Compte de l'assurance-emploi

Description

Le Compte d'assurance-emploi a été établi dans les Comptes du Canada en vertu de la *Loi sur l'assurance-emploi* (ci-après, la *Loi*) en vue d'enregistrer toutes les sommes reçues ou déboursées en application de cette loi. La *Loi* permet à une personne d'obtenir un revenu d'appoint temporaire et d'offrir une aide aux travailleurs admissibles. Le régime vise tous les travailleurs ayant des relations employeur-salarié. Les pêcheurs indépendants sont également couverts en vertu d'un règlement spécial de la *Loi*. En 2003, 15,4 millions de personnes ont cotisé au régime et 2,5 millions d'entre elles ont reçu des prestations.

L'assurance-emploi prévoit ce qui suit :

Des prestations de revenu, au titre de la Partie I de la *Loi sur l'assurance-emploi*, remplacent temporairement le revenu des prestataires, notamment des pêcheurs autonomes en recherche d'emploi. Grâce à des ententes de travail partagées conclues en période de manque de travail temporaire, les travailleurs peuvent aussi recevoir des prestations au prorata lorsqu'ils travaillent une partie de la semaine, évitant ainsi les mises à pied. On verse aussi quatre types de prestations spéciales : prestations de maternité, payables aux mères biologiques qui s'absentent du travail en raison d'une grossesse et d'un accouchement; prestations parentales, payables aux parents biologiques et adoptifs qui s'absentent du travail pour s'occuper d'un nouveau-né ou d'un enfant adopté; prestations de maladie, payables aux prestataires incapables de travailler pour raison de maladie; prestations de compassion, payables aux prestataires qui prodiguent des soins à un enfant, à un parent ou à un conjoint gravement malade ou mourant.

Des prestations d'emploi, au titre de la Partie II de la *Loi*, peuvent être adaptées en prestations d'emploi et mesures de soutien aux besoins individuels et aux facteurs locaux. Le gouvernement du Canada a établi des Ententes sur le développement du marché du travail avec les gouvernements de la plupart des provinces et des territoires. Ceux-ci peuvent, par le truchement de ces ententes, assumer la responsabilité directe de concevoir et d'offrir ces prestations ou de prendre part à des ententes de cogestion avec le gouvernement fédéral.

Les employeurs et les salariés assument tous les coûts associés à l'assurance-emploi sous forme de cotisations. Les dépenses liées aux prestations et à l'administration sont imputées au Trésor et ensuite débitées du Compte d'assurance-emploi. L'excédent au compte produit des intérêts à un taux établi par le ministre des Finances, lequel correspond actuellement à 90 % du taux moyen des bons du Trésor à échéance de trois mois.

Sommaire financier

Le taux de cotisation pour 2006 a été fixé en fonction d'un équilibre des produits et des charges, mais comme la performance économique devait être supérieure à ce qu'on prévoyait au moment où ce taux a été établi, les cotisations en 2006-2007 devraient dépasser d'environ 400 millions de dollars les prestations et les charges administratives. On s'attend à ce que le total des revenus (avec l'intérêt gagné) excède de 2,4 milliards de dollars celui des coûts. Ainsi, l'excédent cumulé passera à 53,1 milliards de dollars en date du 31 mars 2007. Les changements relatifs aux prestations et aux cotisations s'expliquent comme suit :

- On s'attend à ce que les prestations augmentent de 1,1 % pour passer à 14,6 milliards de dollars. Cette croissance est attribuable à une hausse de 3,4 % des prestations hebdomadaires moyennes et, pour contrebalancer, à une diminution prévue de 3,0 % du nombre de prestataires et à une baisse des prestations de maternité et des prestations parentales lorsque le régime québécois d'assurance parentale sera entièrement en application.

Comptes à fins déterminées

Introduction

Les comptes à fins déterminées constituent des catégories spéciales de recettes et de dépenses. Ils présentent les opérations de certains comptes pour lesquels, en raison des lois habilitantes, les recettes doivent être affectées à une fin particulière et les paiements et dépenses connexes imputés à ces recettes. Les opérations propres à ces comptes doivent être considérées séparément.

RHDS est responsable de l'administration de quatre de ces comptes :

- Compte d'assurance-emploi;
- Compte du Régime de pensions du Canada;
- Compte des rentes sur l'Etat;
- Fonds d'assurance de la fonction publique.

Le Compte d'assurance-emploi est un compte consolidé à fins déterminées qui fait partie du processus d'information financière du gouvernement du Canada. Les comptes consolidés à fins déterminées sont utilisés principalement pour des activités ressemblant à celles des ministères dont les opérations ne comportent pas de créances envers des tiers, mais consistent essentiellement en recettes et dépenses du gouvernement.

Le RPC est un CFD qui ne fait pas partie des états financiers consolidés du gouvernement du Canada. Il relève à la fois de ce gouvernement et des provinces participantes. L'autorisation de dépenser du gouvernement en tant qu'administrateur du régime se limite au solde de ce dernier.

Le Compte des rentes sur l'Etat est un compte consolidé à fins déterminées qui fait partie du processus d'information financière du gouvernement du Canada. Il a été créé en vertu de la Loi relative aux rentes sur l'Etat et modifié par la Loi sur l'augmentation du rendement des rentes sur l'Etat, qui a eu pour effet de mettre un terme à la vente des rentes en 1975. Ce compte est évalué chaque année selon une méthode actuarielle, le déficit ou l'excédent étant débité ou crédité au Trésor.

Le Fonds d'assurance de la fonction publique est un compte consolidé à fins déterminées qui fait partie du processus d'information financière du gouvernement du Canada. Il a été créé en vertu de la Loi de l'assurance du service civil. Conformément au paragraphe 16(3) du Règlement concernant l'assurance du service civil, le montant des déficits actuariels est transféré du Trésor au Compte d'assurance de la fonction publique afin d'équilibrer l'actif et le passif du programme.

TABEAU 12 : VÉRIFICATIONS INTERNES ET ÉVALUATIONS (suite)

Personnes handicapées	
Évaluation sommative du Fonds d'intégration pour les personnes handicapées – phase I	Évaluation formative de l'initiative pour l'intégration communautaire
	Autres
Évaluation du Forum urbain mondial 3	
Leçons apprises et études de synthèse	
Travail	
Santé et sécurité au travail	Service fédéral de médiation et de conciliation
	Service Canada
Surveillance financière et opérationnelle des subventions et des contributions	Subventions et contributions – répartition des tâches dans les programmes d'exécution régionale ou locale
	Vérifications au hasard – bénéficiaires des subventions et contributions
Relèves d'emploi – Web	Méthodologie de sélection de dossiers en fonction des risques de la Direction générale de l'intégrité
	Assurance-emploi – répartition des tâches (suivi)
Conformité aux normes de sécurité des technologies de l'information	Vérification de l'information – capacité de ressources humaines
	Centres de technologie
Systèmes en développement (SED) – Programme de sécurité du revenu	Gestion de l'information – Cadre de contrôle de l'information
	Paie et avantages sociaux
Valeurs et éthique (Service Canada)	Régime de pensions du Canada – prestations de retraite (traitement)
	Vérifications financières
Dépenses salariales	Fonctionnement et entretien
	Subventions et contributions versées
Soldes d'ouverture – finances (31 mars 2006)	Certification des états financiers 2005-2006

TABEAU 12 : VÉRIFICATIONS INTERNES ET ÉVALUATIONS

Par suite de la réorganisation ministérielle, les groupes de vérification interne et d'évaluation redélimitent l'univers de vérification et d'évaluation; ils actualisent et remanient aussi les facteurs de risque pour produire un nouveau plan plurianuel axé sur les risques pour les travaux de vérification et d'évaluation en fonction des priorités et des responsabilités nouvelles du Ministère. Le plan de vérifications horizontales du Bureau du contrôleur général et le calendrier de travaux de vérification du Bureau du vérificateur général sont susceptibles d'influer sur ce plan ministériel. On devrait considérer les projets suivants de vérification interne et d'évaluation dans cette perspective :

Évaluations à mener à bien en 2006-2007

Plan de vérification interne 2006-2007

Régime d'assurance-emploi

Projet pilote sur le travail saisonnier et les cinq semaines de prolongation

Évaluation formative du régime de prestations de

compassion

Évaluation sommative du Régime d'assurance-emploi

Programmes d'emploi

Évaluation sommative de l'entente Canada-Alberta sur le développement du marché du travail

Évaluation sommative l'entente Canada-Nouveau-

Brunswick sur le développement du marché du

travail

Évaluation sommative de l'entente Canada-

Saskatchewan sur le développement du marché

du travail

Évaluation sommative des prestations d'emploi et

mesures de soutien (PEMS) en Ontario

Évaluation du projet pilote de Voisey's Bay

Milieu de travail

Évaluation formative du Programme de

reconnaissance des titres de compétence

étrangers

Évaluation sommative du Programme des conseils

sectoriels

Travail

Évaluation stratégique des programmes d'équité en

milieu de travail

Évaluation de mi-mandat du programme du travail

« Commerce international »

Apprentissage

Évaluation formative du Secrétariat national à

l'alphabétisation

Évaluation sommative du Bureau des technologies

d'apprentissage

Logement et sans-abri

Évaluation sommative de l'Initiative nationale pour les

sans-abri

Projets reportés de 2005-2006

Vérification d'attestation 2004-2005 des charges

pensions du Canada

Régime de pensions du Canada – Programme de

prestations d'invalidité, phase I

Régime de pensions du Canada – Programme de

prestations d'invalidité, phase II

Supplément de revenu garanti

Programme Nouveaux horizons pour les aînés

Programme canadien de prêts aux étudiants –

provinces

Examen des états financiers ministériels (Ressources

humaines et Développement des compétences

Canada) 2004-2005

Nouveaux projets pour 2006-2007

Forum urbain mondial – phase I

Forum urbain mondial – phase II

Subventions et contributions – répartition des tâches

(programmes d'exécution nationale)

Subventions et contributions – mode d'évaluation des

propositions

Subventions et contributions – traitement des

demandes et des paiements

Évaluation des contrôles de comptes créditeurs et de

charges courues à payer

Gestion des comptes débiteurs sur prêts directs du

Programme canadien de prêts aux étudiants

Valeurs et éthique (RHDS)

Examen 2005-2006 du Cadre de contrôle financier du

Ministère

Vérification d'attestation 2005-2006 des charges

administratives au compte du Régime de pensions

du Canada

Comprendre la petite enfance

Accords internationaux en matière de sécurité sociale /

prestations internationales

Régime de pensions du Canada – prestations de

retraite (politique et cadre de contrôle)

TABEAU 10 : INITIATIVES HORIZONTALES

Dans l'exercice 2006-2007, RHDSC participera aux initiatives horizontales suivantes et, sauf avis contraire, il en assurera la responsabilité principale :

1. Stratégie emploi jeunesse
2. Programme des conseils sectoriels
3. Ententes sur le développement du marché du travail
4. Programme de reconnaissance des titres de compétence étrangers
5. Programme canadien de prêts aux étudiants
6. Prestation nationale pour enfants
7. Cadre multilatéral pour l'apprentissage et la garde des jeunes enfants
8. Entente sur le développement de la petite enfance
9. Programme de partenariats pour les compétences et l'emploi des Autochtones
10. Stratégie de développement des ressources humaines autochtones
11. Service Canada
12. Plan d'action pour les langues officielles (le Bureau du conseil privé assume la responsabilité principale)
13. Initiative nationale pour les sans-abri

On peut trouver un complément d'information sur les initiatives horizontales à l'adresse http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_f.asp

TABEAU 11 : STRATÉGIE DE DÉVELOPPEMENT DURABLE

En février 2006, Développement social Canada et Ressources humaines et Développement des compétences Canada ont été réunis en un nouveau ministère appelé Ressources humaines et Développement social Canada. On a ainsi unifié les activités des deux ministères sur le plan du développement durable et, pour la période de planification, la priorité sera de mettre au point une nouvelle stratégie de RHDSC dans ce domaine pour 2007-2009. Le Ministère continuera aussi à travailler aux engagements de la dernière année de la période 2004-2006.

Dans la nouvelle stratégie ministérielle de développement durable, on précisera comment les facteurs écologiques, économiques et sociaux entrent en ligne de compte dans l'élaboration des politiques et des programmes et les activités quotidiennes du Ministère.

Objectifs pour la période de planification

- Le Ministère officialisera une vision et une politique qui définissent clairement notre contribution au mouvement de développement durable et fixent un cadre et une orientation à long terme pour ses objectifs dans ce domaine.
- On élaborera la Stratégie de développement durable de RHDSC pour 2007-2009.
- On appuiera les efforts du gouvernement du Canada en ce qui concerne les aspects sociaux et professionnels (marché du travail) du dossier du développement durable.
- On élaborera un nouveau règlement sur la santé et la sécurité au travail où il sera question de la prévention de la violence en milieu de travail et des programmes de prévention des accidents.
- Le Ministère se dotera d'un mécanisme qui garantira la réalisation d'une évaluation environnementale stratégique dans le cadre des propositions de politiques, de plans et de programmes.
- Le Ministère continuera à travailler en matière de développement durable à divers objectifs d'« écologisation » de ses activités (énergie des bâtiments, parcs de véhicules, marchés publics, etc.).

On trouvera plus de détails sur la stratégie actuelle de développement durable et les buts, objectifs et cibles bien précis qui y sont liés au site Web ministériel suivant :

<http://www.rhdcc.gc.ca/tr/sm/sfa/sa/sdd/sd.shtm>

TABLEAU 8 : PROGRAMMES DE PAIEMENTS DE TRANSFERT

Au cours des trois exercices 2006-2007 à 2008-2009, RHDSC gèrera les programmes suivants de paiements de transfert d'une valeur de plus de 5 millions :

1. Stratégie emploi jeunesse
2. Programme Apprentissage des adultes, alphabétisation et compétences essentielles
3. Programme canadien de prêts aux étudiants – obligations
4. Programme canadien de prêts aux étudiants – obligations et paiements d'intérêts
5. Programme canadien de prêts aux étudiants – modalités de financement direct
6. Subventions canadiennes pour études et pour accès
7. Bon d'études canadien
8. Subvention canadienne pour l'épargne-études
9. Régime de sécurité de la vieillesse
10. Supplément de revenu garanti
11. Service des allocations
12. Programme de partenariats pour le développement social
13. Nouveaux horizons pour les aînés
14. Réseaux canadiens de recherche en politiques publiques
15. Fonds d'intégration pour les personnes handicapées
16. Cadre multilatéral pour les ententes relatives au marché du travail pour les personnes handicapées

17. Initiative nationale pour l'apprentissage et la garde des jeunes enfants
18. Partenariats pour les compétences et l'emploi des Autochtones
19. Stratégie de développement des ressources humaines autochtones
20. Programme de développement des ressources humaines autochtones – Joint Voisey's Bay Employment and Training Authority (JETA)
21. Fonds d'infrastructure des centres de formation
22. Programme des conseils sectoriels
23. Programme de reconnaissance des titres de compétence étrangers
24. Fonds d'appui aux communautés minoritaires de langue officielle
25. Initiative nationale pour les sans-abri
26. Initiative des compétences en milieu de travail
27. Prestation universelle pour la garde d'enfants

On peut mieux se renseigner sur ces projets à l'adresse http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_f.asp

TABLEAU 9 : FONDATIONS (SUBVENTIONS CONDITIONNELLES)

En 2006-2007, RHDSC apportera une contribution financière à la Winnipeg Foundation par des subventions conditionnelles; les autres fondations ont reçu un financement unique au cours des années précédentes :

1. Conseil canadien sur l'apprentissage
2. Fondation canadienne des bourses d'études du millénaire
3. Fondation Peter Gzowski pour l'alphabétisation
4. Winnipeg Foundation
5. Read to Me! Foundation Inc.

On peut mieux se renseigner sur ces projets à l'adresse http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_f.asp

TABEAU 7 : PRINCIPALES INITIATIVES D'ORDRE RÉGLEMENTAIRE (suite)

Résultat stratégique : Milieux de travail sécuritaires, sains, équitables, stables, productifs, où règne la coopération, et normes internationales du travail efficaces.

Loi et règlement sur l'équité en matière d'emploi	Il y aura des changements corrélatifs dans le cadre de la mise à jour de la réglementation :
	<ul style="list-style-type: none"> • On mettra à jour le découpage en régions métropolitaines de recensement en se reportant à la publication de 2002 de Statistique Canada; • On mettra à jour la Classification nationale des professions en se reportant au codage de 2001; • On introduira le Système de classification des industries de l'Amérique du Nord; • On apportera des changements administratifs et corrélatifs (modifications de dates et de nom du Ministère).
Règlement sur la prévention de la violence en milieu de travail	<p>Ce règlement vise à prévenir les actes directs ou indirects de violence dans les milieux de travail relevant de la compétence fédérale.</p>

TABLEAU 7 : PRINCIPALES INITIATIVES D'ORDRE RÉGLEMENTAIRE

Réglements	Résultats prévus
Résultat stratégique : Productivité et participation canadiennes accrues par des marchés du travail efficaces et inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage.	
<p>En 2006-2007, il n'y a pas eu de grandes initiatives d'ordre réglementaire qui aient été constatées en ce qui concerne le Régime d'assurance-emploi (a.-e.). On entreprendra selon les besoins de modifier les règlements d'application de cette loi.</p> <p>Réglement sur l'assurance-emploi (Pêche), article 77.4</p> <p>Modification du Réglement sur l'assurance-emploi – projet pilote des prestations prolongées d'assurance-emploi</p> <p>Modification du Réglement sur l'assurance-emploi – prestations de compassion</p>	<p>Avec cette modification, on s'assure que, dans l'établissement du droit aux prestations des pêcheurs dans le Régime d'assurance-emploi, on tient compte de l'existence du régime québécois d'assurance parentale.</p> <p>Avec cette modification, on met en place le projet pilote annoncé qui vise à vérifier les conséquences d'une majoration de cinq (5) semaines du droit à prestations ordinaires jusqu'à un maximum de 45 semaines de prestations, et ce, dans 21 régions de l'assurance-emploi.</p> <p>Avec cette modification, on élargit la définition de membre de la famille pour la détermination de l'admissibilité aux prestations de compassion.</p>
Résultat stratégique : Productivité et participation canadiennes accrues par des marchés du travail efficaces et inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage.	
<p>Améliorations d'ordre administratif apportées au cadre réglementaire du Programme canadien de prêts aux étudiants :</p> <p>Le Programme canadien de prêts aux étudiants prévoit procéder à des changements d'ordre réglementaire qui en accroîtront l'efficacité et qui clarifieront les règles applicables à certaines prestations.</p> <p>Pour la mise en œuvre de ces changements, il faut modifier le Règlement fédéral sur l'aide financière aux étudiants et le Règlement fédéral sur les prêts aux étudiants.</p>	<p>Le cadre légal et réglementaire du Programme canadien de prêts aux étudiants a subi des changements fréquents – presque à une cadence annuelle – depuis la création de ce programme. Des améliorations permanentes d'ordre législatif et réglementaire s'imposent si on entend rester à la hauteur de ces changements incessants.</p>

TABLEAU 6C : SOURCES DE REVENUS DISPONIBLES ET NON DISPONIBLES -

[illegible]

TABLEAU 6B : DÉVELOPPEMENT SOCIAL CANADA
SOURCES DES REVENUS DISPONIBLES ET NON DISPONIBLES

RECETTES DISPONIBLES

Autorités totales	2005-2006	2006-2007	2007-2008 ^a	2008-2009 ^a	(en millions de dollars)	
					Recettes prévues	Recettes
RECETTES NON DISPONIBLES	Investissement social	-	5,7	5,4	5,4	5,4
	Recouvrement de l'a-e	52,7	43,3	43,6	43,6	43,5
	Recouvrement du RPC	52,7	49,0	49,0	48,9	48,9
	Innovation et politiques en matière de développement social	11,5	8,6	9,2	9,2	9,2
	Recouvrement de l'a-e	-	12,9	12,7	12,7	12,7
	Recouvrement du RPC	11,5	21,5	21,9	21,9	21,9
	Prestation de services	60,2	54,5	55,6	55,6	55,5
	Recouvrement de l'a-e	187,8	175,9	176,2	176,2	176,2
	Recouvrement du RPC	248,0	230,4	231,8	231,7	231,7
	Total des revenus disponibles	312,2	300,9	302,7	302,5	302,5
RECETTES NON DISPONIBLES	Investissement social	-	0,3	0,5	0,5	0,5
	Remboursement des dépenses liées au RASE de l'a-e	4,2	2,5	2,5	2,5	2,5
	Frais utilisateurs: Recherches sur les banques de données du RPC et SV	0,1	0,1	0,1	0,1	0,1
	Innovation et politiques en matière de développement social	4,3	2,9	3,1	3,1	3,1
	Remboursement des dépenses liées au RASE de l'a-e	1,2	0,7	0,6	0,6	0,6
	Remboursement des dépenses liées au RASE du RPC	-	0,9	0,9	0,9	0,9
	Prestations de services	1,2	1,6	1,5	1,5	1,5
	Remboursement des dépenses liées au RASE de l'a-e	6,8	6,0	6,1	6,1	6,1
	Remboursement des dépenses liées au RASE du RPC	15,1	14,4	14,6	14,5	14,5
	Frais utilisateurs: Frais pour le remplacement des cartes pour le numéro d'assurance sociale	1,9	1,9	1,9	1,9	1,9
Total des revenus disponibles et non disponibles		341,5	327,7	329,9	329,6	329,6
	Total des revenus non disponibles	29,3	26,8	27,2	27,1	27,1

TABEAU 6A : RESSOURCES HUMAINES ET DÉVELOPPEMENT DES COMPÉTENCES CANADA

RECETTES DISPONIBLES

(en millions de dollars)			
2005-2006		2006-2007	
Autorités totales		Recettes prévues	
754,2	780,0	778,6	781,3
328,7	330,1	330,7	325,0
69,1	62,0	56,7	56,7
7,4	15,8	15,6	15,6
76,6	77,4	78,4	80,4
0,6	0,6	0,6	0,6
77,2	78,0	79,0	81,0
-	-	-	-
107,9	91,3	86,9	86,6
2,2	-	-	-
110,1	91,3	86,9	86,6
77,7	63,3	63,1	63,0
13,1	14,7	14,7	14,7
90,8	78,0	77,8	77,7
Total des recettes disponibles			
1 437,5	1 435,2	1 425,3	1 423,9
RECETTES NON DISPONIBLES			
Assurance-emploi	Remboursement des dépenses liées au RASE de l'a-e	94,1	91,0
Programmes d'emploi	Remboursement des dépenses liées au RASE de l'a-e	30,2	25,3
Compétences en milieu de travail	Remboursement des dépenses liées au RASE de l'a-e	8,0	6,2
Apprentissage	Remboursement des dépenses liées au RASE de l'a-e	0,7	1,3
Programme canadien de prêts aux étudiants	Remboursement des dépenses liées au RASE de l'a-e	395,6	663,8
Travail - Frais de services	Sans-abri	396,3	665,1
2,2	-	2,2	2,5
4,1	-	6,6	-
0,1	-	-	-
4,2	6,6	6,2	6,2
12,5	8,7	8,6	8,6
2,1	2,1	2,1	2,1
14,6	10,8	10,7	10,7
Total des recettes non disponibles			
549,6	648,5	733,1	807,0
1 987,1	2 083,7	2 158,4	2 230,9
Total des sources de revenus disponibles et non disponibles			

TABLEAU 4A : RESSOURCES HUMAINES ET DÉVELOPPEMENT DES COMPÉTENCES CANADA	
SERVICES REÇUS À TITRE GRACIEUX	
(en millions de dollars)	2006-2007
Contributions visant la part des employeurs des primes d'assurance et coûts payés par le Secrétaire du Conseil du Trésor	14,0
Traitements et coûts connexes des services juridiques fournis par Justice Canada	3,7
Total des Services reçus à titre gracieux en 2006-2007	17,7

TABLEAU 4B : DÉVELOPPEMENT SOCIAL CANADA	
SERVICES REÇUS À TITRE GRACIEUX	
2006-2007	
(en millions de dollars)	Total
Contributions de l'employeur aux primes du régime d'assurance des employés et dépenses payées par le SCT	16,3
Indemnisation des victimes d'accidents du travail assurée par Ressources humaines et Développement des Compétences Canada	0,3
Traitements et dépenses connexes liés aux services juridiques fournis par Justice Canada	0,1
Total des Services reçus à titre gracieux pour 2006-2007	16,7

TABLEAU 5 : RESSOURCES HUMAINES ET DÉVELOPPEMENT DES COMPÉTENCES CANADA			
PRÊTS (NON BUDGÉTAIRES)			
(en millions de dollars)		2005-2006	2006-2007
		Autorités totales	Dépenses prévues
Apprentissage	Prêts consentis en vertu de la Loi fédérale sur l'aide financière aux étudiants	1 331,3	981,5
	Total	1 331,3	981,5
		769,1	560,8

- Comprendre la petite enfance en vue de permettre aux enfants canadiens d'avoir un départ exemplaire dans la vie en renseignant les collectivités sur la facilité d'apprendre de leurs enfants (5,0 millions de dollars);
- Nouveaux horizons pour les aînés en vue de soutenir les projets locaux de l'ensemble du Canada et leur vie active (1,9 million de dollars);
- Stratégie pour le secteur bénévolo : partenariat entre le gouvernement fédéral et le secteur bénévolo en vue de mettre en place un cadre de collaboration et d'innovation communautaires pour améliorer le mieux-être social et économique des Canadiens (1,5 million de dollars);
- le Secrétariat national des aînés doit servir de point de convergence des efforts fédéraux qui concernent les personnes âgées et soutenir l'élaboration d'une approche coopérative des enjeux qui concernent les personnes âgées avec une variété de partenaires (2,3 millions de dollars);
- un Plan d'action pour les langues officielles en vue de soutenir de dynamiques communautaires minoritaires de langue officielle (1,1 million de dollars);
- une hausse jusqu'aux niveaux de référence pour refaire le remboursement des ressources qui ont soutenu les préparatifs de l'an 2000 (10,5 millions de dollars);
- divers transferts provenant de Ressources humaines et Développement des compétences Canada (2,8 millions de dollars);
- hausse de 665,9 millions de dollars des subventions et contributions votées qui est principalement attribuable à :
 - des paiements aux provinces et aux territoires en vue d'offrir des fonds de transition (650,0 millions de dollars) aux provinces et aux territoires pour éliminer graduellement les ententes d'apprentissage et de garde des jeunes enfants signées par le gouvernement précédant en 2005;
 - élargir le programme Comprendre la petite enfance pour recueillir des renseignements sur la capacité d'apprentissage des enfants des collectivités, sur les facteurs influant sur cet apprentissage et sur les mesures de soutien locales (5,6 millions de dollars);
 - le programme Nouveaux horizons pour les aînés, qui soutient les projets locaux partout au Canada et encourage les personnes âgées à contribuer à leur collectivité par leur participation sociale et leur vie active (7,8 millions de dollars);
 - la subvention des Réseaux canadiens de recherche en politiques publiques Inc., un organisme de recherche indépendant sans but lucratif ayant le titre d'organisme de bienfaisance. Les RCRPP ont pour mission d'informer l'élaboration d'une politique sociale et économique au Canada par la recherche et la participation de la population (3,0 millions de dollars).
- hausse de 1 685,0 millions de dollars des paiements de programmes législatifs qui est principalement attribuable à :
 - une augmentation de 1 682,0 millions de dollars aux Programmes de la sécurité du revenu qui est répartie de la façon suivante : les paiements de la sécurité de la vieillesse (1 046,0 millions de dollars); les paiements du Supplément de revenu garanti qui offrent un revenu supplémentaire aux prestataires de la sécurité de la vieillesse à faible revenu (587,0 millions de dollars), et les paiements d'allocations, qui offrent une prestation de plus évaluée en fonction du revenu aux personnes survivantes et aux couples qui vivent grâce aux prestations de sécurité de la vieillesse d'un seul époux ou conjoint de fait (49,0 millions de dollars). Cette hausse s'explique par l'augmentation générale de la population de personnes de 65 ans et plus qui reçoivent des prestations de base de la SV (2,31 %), du SRG (3,90 %) et des allocations (4,95 %), ainsi que la majoration du montant moyen des prestations annuelles – SV de base (2,73 %), SRG (2,28 %) et allocations (4,57 %);
 - une diminution de 0,9 million de dollars pour les paiements versés aux agences de recouvrement privées puisque les comptes en souffrance seront envoyés plus rapidement aux agences;
 - une augmentation de 4,0 millions de dollars aux contributions aux régimes de prestations pour employés en fonction de l'accroissement de la masse salariale.

- utilisation accrue de la Subvention canadienne pour l'épargne-études (145,0 millions de dollars) destinée aux participants à des régimes enregistrés d'épargne-études; dans le Budget principal des dépenses 2006-2007, on introduit une nouvelle formulation à cause de l'entrée en vigueur de la *Loi canadienne sur l'épargne-études* et en vue d'encourager les Canadiens à faire des économies pour l'éducation postsecondaire de leurs enfants; les sommes en question sont de 575,0 millions de dollars pour la nouvelle formulation et de 430,0 millions de dollars pour l'ancienne;
- baisse nette de 3,0 millions de dollars pour le Système fédéral d'indemnisation des accidentés du travail à cause d'une augmentation prévue des recettes en provenance des autres ministères et des sociétés d'Etat dans le cadre d'une initiative de recouvrement des frais;
- hausse de 7,4 millions de dollars des coûts du Régime d'avantages sociaux des employés à cause d'une majoration des charges salariales;
- baisse de 59,3 millions de dollars des paiements non budgétaires à l'égard des prêts versés en vertu de la *Loi canadienne sur l'aide financière aux étudiants*; cette baisse s'explique principalement par l'effet de l'accroissement des remboursements d'emprunts (288,4 millions de dollars) dans ce portefeuille, ce qui est compensé par une augmentation de 229,1 millions de dollars des prêts canadiens aux étudiants, la limite d'emprunt ayant monté de 165 \$ à 210 \$ par semaine d'études.

TABEAU 3B : DÉVELOPPEMENT SOCIAL CANADA
POSTES VOTÉS ET LÉGISLATIFS INDICQUÉS DANS LE BUDGET PRINCIPAL

(en millions de dollars)			
2006-2007			
Poste voté ou législatif	Libellé pour le poste voté ou législatif	Budget principal	Budget précédent
10	Dépenses de fonctionnement	295,6	244,0
15	Subventions et contributions	946,6	280,8
(L)	Ministre de Développement Social-	0,0	0,1
(L)	Traitement et allocation pour automobile	22 255,0	22 209,0
(L)	Versements de la Sécurité de la Vieillesse	6 820,0	6 233,0
(L)	Versements du Supplément de revenu garanti	500,0	451,0
(L)	Versements d'Allocations	18,5	19,4
(L)	Paiements aux agences privées de recouvrement en vertu de l'article 17.1 de la Loi sur la gestion des finances publiques	66,4	62,4
(L)	Contributions aux régimes d'avantages sociaux des employés	31 902,1	29 499,7
Total du Ministère		31 902,1	29 499,7

Principales données financières

Le Budget principal des dépenses 2006-2007 de Développement social Canada totalise 31 902,1 millions de dollars, ce qui représente une hausse nette de 2 402,4 millions de dollars par rapport au Budget principal des dépenses 2005-2006, qui était de 29 499,7 millions de dollars. Les principaux changements sont les suivants :

- hausse de 51,5 millions de dollars des dépenses nettes d'exploitation qui est principalement attribuable à :

- la signature de nouvelles conventions collectives (10,7 millions de dollars);
- l'accroissement du financement de l'Enquête sur la participation et les limitations d'activités, une enquête nationale détaillée auprès des Canadiens handicapés qui habitent dans un ménage privé (6,6 millions de dollars);
- la mise en œuvre de campagnes d'information destinées aux personnes handicapées, aux personnes âgées, aux familles et aux enfants (6,0 millions de dollars);
- l'administration de programmes de subventions et contributions (8,4 millions de dollars);

- baisse de 8,4 millions de dollars dans l'administration des programmes de subventions et contributions;
- transferts divers à DSC (2,8 millions de dollars);

- baisse de 14,3 millions de dollars des subventions et contributions votées en grande partie à cause d'une diminution de 16,8 millions de dollars par le transfert de l'initiative de revitalisation du secteur riverain de Toronto. Pour compenser, il y a une augmentation de 102,5 millions de dollars pour des programmes nouveaux ou améliorés comme les suivants :

- Initiative des compétences en milieu de travail (31,7 millions de dollars) en vue du soutien de projets en partenariat qui visent à expérimenter de nouvelles façons d'encourager les employeurs à investir dans le développement des compétences en milieu de travail, l'accent étant mis sur la petite et moyenne entreprise;
- Stratégie de développement des ressources humaines autochtones (22,5 millions de dollars) en vue d'aider les Autochtones à se préparer à l'emploi, à trouver du travail et à le garder;
- Communautés minoritaires de langue officielle pour le développement des ressources humaines, la croissance économique, la création d'emplois et le maintien en poste dans ces collectivités (12,0 millions de dollars);
- Fonds d'infrastructure des centres de formation (11,0 millions de dollars) en vue d'aider les centres de formation patronaux-syndicaux à acheter des machines et du matériel nouveaux pour les métiers se caractérisant par une importante évolution technologique, un élargissement des activités ou la mise en place de nouveaux programmes pédagogiques;
- Forum urbain mondial à Vancouver en 2006, rencontre internationale qui porte sur la ville, le logement et l'urbanisation (9,6 millions de dollars);
- Secrétariat national à l'alphabétisation pour la promotion de l'alphabétisation en milieu de travail (8,6 millions de dollars);
- Programme d'apprentissage et de garde des jeunes enfants (AGJE) à l'intention des enfants autochtones en réserve (6,8 millions de dollars) en vue de la construction de nouveaux centres AGJE, de l'amélioration des centres qui existent déjà et d'un meilleur accès à la formation pour les travailleurs de ces centres;

- hausse de 245,7 millions de dollars des paiements législatifs de programmes principalement à l'égard de ce qui suit :
- hausse de 51,3 millions de dollars du Programme canadien de prêts aux étudiants (PCPE) à cause de :

- hausse de 40,8 millions de dollars des paiements dans le cadre des Ententes de financement direct du PCPE par suite d'une bonification des mesures de gestion de dette, d'une majoration des frais administratifs pris en charge pour les provinces participantes et de modifications des dispositions relatives aux remises de prêt;
- baisse de 2,2 millions de dollars des obligations en vertu de la Loi canadienne sur les prêts aux étudiants par suite d'une révision à la baisse des estimations de paiements après analyse des tendances passées, ainsi que de la révision des prévisions relatives au portefeuille des prêts garantis;
- baisse de 24,2 millions de dollars des intérêts et autres paiements dans le cadre de la Loi canadienne sur l'aide financière aux étudiants principalement par suite d'une bonification des mesures de gestion de dette;
- hausse de 36,9 millions de dollars de la Subvention canadienne pour l'épargne-études principalement par suite de la mise en œuvre de la nouvelle Subvention canadienne pour études dans le cas des étudiants souffrant d'une invalidité permanente et appartenant à des familles à faible revenu;
- établissement du nouveau Bon d'études canadien (45,0 millions de dollars) en vue de l'épargne-études pour les enfants des familles ayant droit à la Prestation nationale pour enfants;

Principales données financières

Le Budget principal des dépenses 2006-2007 de Ressources humaines et Développement des compétences Canada totalise 3 456,6 millions de dollars, ce qui représente une hausse nette de 229,3 millions de dollars par rapport au budget principal 2005-2006 avec une valeur de 3 227,3 millions de dollars. Les principaux changements sont les suivants :

- hausse de 57,2 millions de dollars des dépenses nettes de fonctionnement qui est principalement attribuable aux facteurs suivants :
 - hausse liée à l'administration de la Subvention canadienne pour l'épargne-études et du Bon d'études canadien (18,1 millions de dollars);
 - augmentations de salaire dans les conventions collectives (12,8 millions de dollars);
 - administration de programmes comme les suivants :

- Stratégie des métiers et de l'apprentissage (9,5 millions de dollars) en vue de la collaboration avec les provinces, les territoires et les intervenants au renforcement de l'apprentissage dans les 45 métiers du Programme du Sceau rouge;
- Initiative des compétences en milieu de travail (5,7 millions de dollars) en vue de la réalisation de ce programme qui comprend des activités d'évaluation de projets, de gestion d'appels de propositions, de reddition de comptes, de contrôle de conformité et d'évaluation; activités de prévention du Travail (4,4 millions de dollars) en vue d'accroître l'intégrité de l'exécution du programme Travail;
- Stratégie de développement des ressources humaines autochtones (2,5 millions de dollars) en vue d'aider les Autochtones à se préparer à l'emploi, à trouver du travail et à le garder;
- volet Travail du Plan d'action du Canada contre le racisme (2,4 millions de dollars) en vue de l'application d'une stratégie de lutte au racisme en milieu de travail qui vise à éliminer les obstacles à l'emploi et à la mobilité verticale des membres des minorités visibles et des peuples autochtones au Canada, ainsi qu'à faciliter l'intégration des gens qualifiés au milieu de travail canadien;

- Portail immigration (2,3 millions de dollars) en vue de la création d'une information pour les immigrants éventuels ou nouveaux sur l'évaluation des titres de compétence et les possibilités d'emploi;
- Secrétariat national à l'alphabétisation (2,0 millions de dollars) en vue de l'élaboration d'une stratégie nationale en matière d'alphabétisation et de compétences essentielles;
- Communautés minoritaires de langue officielle (1,6 million de dollars) en vue de favoriser le dynamisme des collectivités en question, et ce, en veillant à ce qu'elles disposent des outils nécessaires à la contribution qu'elles doivent apporter;

- Forum urbain mondial à Vancouver (1,3 million de dollars) pour l'organisation et la tenue de cette manifestation internationale de cinq jours à laquelle sont conviés les représentants de plus de 150 pays et qui doit avoir lieu du 19 au 23 juin 2006. Cette rencontre internationale porte sur la ville, le logement et l'urbanisation;
- Programme des jeunes stagiaires (0,9 million de dollars) en vue du transfert du Programme des jeunes stagiaires de la fonction publique fédérale, ce qui représente l'engagement pris par le gouvernement canadien comme grand employeur national en vue de faciliter aux jeunes en général et aux jeunes à risque en particulier le passage au marché du travail;
- Fonds d'infrastructure des centres de formation (0,7 million de dollars) en vue de la réalisation et de l'administration de ce programme qui comporte des activités d'évaluation de projets, de gestion d'appels de propositions, de reddition de comptes, de contrôle de conformité et d'évaluation;

- affectation du Plan de publicité gouvernementale pour des campagnes de publicité qui visent Service Canada (3,0 millions de dollars) et font la promotion des services gouvernementaux axés sur le citoyen;
- campagnes d'information publique (0,7 million de dollars), y compris 0,65 million de dollars pour Service Canada;

TABLEAU 3A : RESSOURCES HUMAINES ET DÉVELOPPEMENT DES COMPÉTENCES CANADA
POSTES VOTÉS ET LÉGISLATIFS MENTIONNÉS DANS LE BUDGET PRINCIPAL

2006-2007

(en millions de dollars)

Item voté ou législatif	Budget principal actuel	Budget principal précédent
1	323,2	266,0
5	825,4	839,7
(L)	Ministre des Ressources humaines et du Développement des compétences - Traitement et allocation pour automobile	0,1
(L)	Ministre du Travail - Traitement et allocation pour automobile	0,1
(L)	Palements liés aux modalités de financement direct accordés en vertu de la Loi fédérale sur l'aide financière aux étudiants	0,1
(L)	Palements d'intérêts aux institutions de crédit en vertu de la Loi fédérale sur l'aide financière aux étudiants	11,7
(L)	Palements relatifs aux obligations contractées sous forme de prêts garantis en vertu de la Loi fédérale sur l'aide financière aux étudiants	9,5
(L)	Palements d'intérêts et autres obligations aux institutions de crédit en vertu de la Loi fédérale sur l'aide financière aux étudiants	70,6
(L)	Subventions canadiennes pour études aux étudiants à temps plein et à temps partiel admissibles aux termes de la Loi fédérale sur l'aide financière aux étudiants	83,0
(L)	Subventions aux fiduciaires de régimes enregistrés d'épargne-études (REEE) au profit des bénéficiaires nommés par ces REEE, selon les termes du règlement sur les subventions canadiennes pour l'épargne-études de la Loi sur le ministère du Développement des ressources humaines	-
(L)	Palements de Subventions canadiennes pour l'épargne-études aux fiduciaires de régimes enregistrés d'épargne-études (REEE) au nom des bénéficiaires des REEE afin d'encourager les Canadiens à épargner pour les études postsecondaires de leurs enfants	575,0
(L)	Palements de Bons d'études canadiens aux fiduciaires de régimes enregistrés d'épargne études (REEE) au nom des bénéficiaires des REEE afin d'appuyer l'accès à l'éducation postsecondaire des enfants de familles à faible revenu	45,0
(L)	Prestations de retraite supplémentaires - Pensions pour les agents des rentes sur l'État	-
(L)	Palements de prestations d'aide à l'adaptation, conformément aux modalités prescrites par le gouverneur en conseil, en vue d'aider les travailleurs qui ont été mis à pied en raison de la concurrence des importations, de la restructuration d'une industrie et de graves perturbations économiques au niveau d'un secteur d'activité ou d'une région	-
(L)	Redressement du passif actuariel de l'assurance de la fonction publique	0,1
(L)	Palements d'indemnités à des agents de l'État et à des marins marchands	48,0
(L)	Contributions aux régimes d'avantages sociaux des employés	177,7
Total budgétaire	2 475,1	2 186,5
	981,5	1 040,8
Total du Ministère	3 456,6	3 227,3

[illegible]

RESSOURCES PAR ACTIVITÉ DE PROGRAMME						
TABLEAU 2A : RESSOURCES HUMAINES ET DÉVELOPPEMENT SOCIAL CANADA						
2006-2007						
	Budget principal des dépenses	Budget principal des dépenses	Budget principal des dépenses	Budget principal des dépenses	Budget principal des dépenses	Budget principal des dépenses
	Inclus dans le budget principal	Ajustements (Dépenses prévues non incluses dans le budget principal)	Economies en provisionnement	Total des dépenses prévues		
(en millions de dollars)	Activités de programme	Budget de fonctionnellement	Subventions et contributions	Dépenses disponibles	Revenus disponibles	(Net) Total
	Assurance-emploi	883,3	0,1	883,4	(783,3)	100,1
	Programmes d'emploi	429,0	540,2	969,2	(322,2)	647,0
	Compétences en milieu de travail	96,1	88,4	1 226,9	(56,4)	128,1
	Apprentissage	162,2	1 064,7	1 226,9	(15,6)	1 211,3
	Travail	213,4	3,9	217,3	(78,0)	139,3
	Sans-abri	40,4	147,9	188,3	-	188,3
	Soutien aux politiques et aux programmes	103,2	-	103,2	(81,1)	22,1
	Prestation des services	128,1	-	128,1	(89,2)	38,9
Total		2 055,7	1 845,2	3 900,9	(1 425,8)	2 475,1
		81,5		981,5		81,5
		(0,3)				
		20,6				
		29,3				
		0,4				
		32,2				
		(0,3)				
		171,2				
		188,1				
		(0,1)				
		28,8				
		(0,2)				
		31,3				

TABLEAU 1C : DÉPENSES PRÉVUES – TABLEAU DE CONCORDANCE

RESSOURCES HUMAINES ET DÉVELOPPEMENT SOCIAL CANADA - ACTIVITÉS DE PROGRAMME

Activités de programme 2006-2007	2006-2007 Dépenses prévues (en millions de dollars) - nettes	Marché du travail	Compétences en milieu de travail	Apprentissage	Travail	Investissement social	Enfants et famille	Logement et sans-abri	Prestation de services	Politique, recherche et communication	Autres - Comptes à fins déterminées	Total
Canada	99,4	-	-	-	-	-	-	-	-	-	-	99,4
Développement des Compétences	667,2	667,2	157,3	-	-	-	-	-	-	-	-	667,2
Compétences en milieu de travail	-	-	-	-	-	-	-	-	-	-	-	157,3
Apprentissage	-	-	-	-	2 193,0	-	-	-	-	-	-	2 193,0
Travail	-	-	-	-	-	171,2	-	-	-	-	-	171,2
Sans-abri	-	-	-	-	-	-	-	188,1	-	-	-	188,1
Soutien aux politiques et aux programmes	-	-	-	-	-	-	-	-	-	28,8	-	28,8
Prestation des services	-	-	-	-	-	-	-	-	31,3	-	-	31,3
Sous-total RHDDC	766,6	157,3	2 193,0	171,2	-	-	-	188,1	31,3	28,8	-	3 536,3
Développement Social Canada	-	-	-	-	-	30 960,1	2 282,8	-	-	-	-	33 242,9
Investissement social	-	-	-	-	-	-	-	-	-	-	-	33 242,9
Innovation et politiques en matière de développement social	-	-	-	-	-	-	-	-	-	-	-	45,8
Prestation de services	-	-	-	-	-	-	-	-	-	-	-	216,7
Sous-total DSC	-	-	-	-	-	30 960,1	2 282,8	-	216,7	45,8	-	33 505,4
Total consolidé des dépenses nettes prévues	766,6	157,3	2 193,0	171,2	-	30 960,1	2 282,8	188,1	248,0	74,6	-	37 041,7
Compte à fins déterminées	12 442,0	-	-	-	-	-	-	-	-	-	-	12 442,0
Assurance-emploi, Partie I	-	-	-	-	-	-	-	-	-	-	-	-
Assurance-emploi, prestations d'emploi et mesures de soutien	2 137,5	-	-	-	-	-	-	-	-	-	-	2 137,5
Créances douteuses - A-e	-	-	-	-	-	-	-	-	-	-	-	57,0
Coûts administratifs - A-e	-	-	-	-	-	-	-	-	-	-	-	1 624,2
Sous-total - A-e	-	-	-	-	-	-	-	-	-	-	-	1 624,2
Compte d'assurance-emploi	14 579,5	-	-	-	-	-	-	-	-	-	-	16 260,7
Régime de pensions du Canada (RPC)	-	-	-	-	-	-	-	-	-	-	-	26 132,3
Prestations-RPC	-	-	-	-	-	-	-	-	-	-	-	397,7
Coûts administratifs - RPC	-	-	-	-	-	-	-	-	-	-	-	26 530,0
Sous-total - RPC	-	-	-	-	-	-	-	-	-	-	-	48,3
Compte à fins déterminées - autres	48,3	-	-	-	-	-	-	-	-	-	-	48,3
Régime d'avantages sociaux des employés récupérable du compte de l'a-e	-	-	-	-	-	-	-	-	-	-	-	(167,5)
Total consolidé	15 394,4	157,3	2 193,0	171,2	-	57 092,4	2 282,8	188,1	248,0	74,6	1 911,4	79 713,2

- une augmentation de 3 629,2 millions de dollars des paiements législatifs qui est principalement attribuable à :
 - une hausse de 1 582,7 millions de dollars aux Programmes de la sécurité du revenu qui reflète les prévisions de la population de clients et des paiements de prestations moyens;
 - une hausse de 2 260,0 millions de dollars pour la mise en place de la nouvelle Prestation universelle pour la garde d'enfants (1 610 millions de dollars) et des paiements aux provinces et territoires (650,0 millions de dollars) dans le but d'offrir des fonds de transition pour éliminer graduellement les ententes d'apprentissage et de garde des jeunes enfants signées par le gouvernement précédent en 2005;
 - une baisse de 210,5 millions de dollars des paiements de prestations pour les coûts de l'énergie, soit des paiements uniques de 125 \$ (ou 250 \$ pour les couples) versés en 2005-2006 aux personnes âgées admissibles au Supplément de revenu garanti ou à l'allocation pour la hausse des coûts de l'énergie;
 - une hausse de 4,9 millions de dollars des paiements aux agences de recouvrement privées;
 - une baisse de 7,3 millions de dollars des cotisations aux régimes de prestations des employés;
 - une augmentation de 1 145,1 millions de dollars des cotisations au Régime de pensions du Canada (RPC). La hausse des prestations de 1 155,5 millions de dollars reflète les prévisions de la population de clients et des paiements de prestations moyens. Cette augmentation est atténuée par une baisse de 10,4 millions de dollars des coûts d'administration du RPC.
- En 2007-2008, les dépenses prévues consolidées devraient atteindre 62 848,4 millions de dollars, ce qui représente une hausse de 2 761,9 millions de dollars par rapport aux dépenses prévues en 2006-2007. Les principaux changements sont les suivants :
 - une hausse de 1 397,2 millions de dollars des paiements législatifs qui est principalement attribuable à une augmentation de 1 320,0 millions de dollars des Programmes de la sécurité du revenu d'après les prévisions de la population et des paiements de prestations moyens, une hausse de 475,0 millions de dollars relative à la Prestation universelle pour la garde d'enfants, une réduction de 650,0 millions de dollars des paiements aux provinces et territoires pour le fonds de transition qui éliminera progressivement les ententes d'apprentissage et de garde des jeunes enfants signées par le gouvernement précédent en 2005, et une augmentation de 250,0 millions de dollars pour la création de nouveaux espaces en garderie;
 - une hausse de 1 366,8 millions de dollars au Régime de pensions du Canada. Cette hausse de 1 364,5 millions de dollars de prestations reflète les prévisions de la population de clients et des paiements de prestations moyens.
- Pour 2008-2009, les dépenses prévues consolidées devraient atteindre 65 725,2 millions de dollars, ce qui représente une hausse de 2 876,8 millions de dollars par rapport aux dépenses prévues en 2007-2008. Les principaux changements sont les suivants :
 - une augmentation de 1 452,3 millions de dollars des paiements législatifs qui est principalement attribuable à une hausse de 1 470,0 millions de dollars aux Programmes de la sécurité du revenu, et une baisse de 20,0 millions de dollars pour la Prestation universelle pour la garde d'enfants;
 - une augmentation de 1 421,9 millions de dollars des cotisations au Régime de pensions du Canada. Cette hausse de 1 420,9 millions de dollars de prestations reflète les prévisions de la population de clients et des paiements de prestations moyens.

TABLEAU 1B : DÉVELOPPEMENT SOCIAL CANADA

DÉPENSES PRÉVUES DU MINISTÈRE ET ÉQUIVALENTS TEMPS PLEIN (suite)

(en millions de dollars)			
Autorités totales	Dépenses prévues	Dépenses prévues	Dépenses prévues
2005-2006	2006-2007	2007-2008	2008-2009
(19,3)	(17,9)	(17,9)	(17,9)
Dépenses au titre du Régime d'avantages sociaux des employés du Ministère, recouvrables à même le régime de pensions du Canada			
29 813,3	33 487,6	34 881,3	36 336,4
Total DSC consolidé			
29,3	26,8	27,2	27,1
Moins: Revenus non disponibles			
19,8	16,7	16,4	16,3
Plus: Coûts des services reçus à titre gracieux			
29 803,8	33 477,5	34 870,5	36 325,6
Total DSC			
6 655	6 206	6 147	6 147
Équivalents temps plein (ETP)			

¹ Les économies totales sont 3,390 millions de dollars moins 0,339 millions de dollars de revenus disponibles.

Principales données financières

Les dépenses consolidées relevant de la compétence de Développement social Canada devraient atteindre 60 086,5 millions de dollars en 2006-2007, soit 4 816,5 millions de dollars de plus que le total des dépenses autorisées de 55 270,0 millions de dollars en 2005-2006. Cet écart est principalement attribuable aux facteurs suivants :

- une hausse de 39,9 millions de dollars des dépenses nettes d'exploitation qui proviennent principalement de :

- des fonds supplémentaires pour l'Enquête sur la participation et les limitations d'activités (6,6 millions de dollars);
- la mise en œuvre de campagnes d'information destinées aux personnes handicapées, aux personnes âgées, aux familles et aux enfants (4,0 millions de dollars);
- l'administration de programmes de subventions et contributions (8,4 millions de dollars);
- le Secrétariat national des aînés servira de point de convergence des efforts fédéraux qui concernent les personnes âgées et soutiendra l'élaboration d'une approche coopérative des enjeux qui concernent les personnes âgées avec une variété de partenaires (2,3 millions de dollars);
- un Plan d'action pour les langues officielles en vue de soutenir de dynamiques communautaires minoritaires de langue officielle (1,1 million de dollars);
- une augmentation jusqu'aux niveaux de référence pour refléter le remboursement des ressources qui ont soutenu les préparatifs de l'an 2000 (10,5 millions de dollars);
- les transferts provenant de Ressources humaines et Développement des compétences Canada (2,8 millions de dollars);
- ces hausses sont contrebalancées par :
 - la réduction des coûts du nouveau ministère par suite de la réduction des effectifs au Cabinet (1,8 million de dollars);
 - les économies à réaliser par réduction des dépenses d'acquisitions (2,4 millions de dollars);

TABLEAU 1B : DÉVELOPPEMENT SOCIAL CANADA

DÉPENSES PRÉVUES DU MINISTÈRE ET ÉQUIVALENTS TEMPS PLEIN

(en millions de dollars)			
2005-2006	2006-2007	2007-2008	2008-2009
Autorités totales	Dépenses prévues	Dépenses prévues	Dépenses prévues
Investissement social (excluant les prestations pour la sécurité de la vieillesse (SV))	434,7	437,3	440,1
Investissement social (Fournitures pour la SV)	28 893,0	31 895,0	33 365,0
Innovation et politiques en matière de développement social	29 291,7	31 009,7	33 806,1
Prestation de services	476,1	508,8	509,8
Budgétaire du Budget principal des dépenses (brut)	29 776,3	32 203,3	35 493,8
Moins: Revenus disponibles	(276,6)	(301,2)	(302,5)
Total du Budget principal des dépenses	29 499,7	31 902,1	35 191,3
Rajustements:			
Mandat spécial du gouverneur général	31,3	-	-
Autres	9,9	-	-
- Crédit 05 du CT	0,4	-	-
- Crédit 10 du CT	11,1	-	-
- Régime d'avantages sociaux des employés du Ministère (RASE)	(24,3)	-	-
- Gels	304,5	-	-
- Redressements législatifs aux fins des comptes publics	301,6	-	-
Plan de publicité du gouvernement du Canada	s/o	(2,0)	0,0
Prestation universelle pour la garde d'enfants	s/o	1 610,0	2 065,0
Garde d'enfants - Ententes prov./terr.	s/o	650,0	-
Nouvelles places en garderie	s/o	-	250,0
Initiative nationale d'apprentissage	s/o	(650,0)	(1 150,0)
Prestation pour les coûts de l'énergie	s/o	0,4	0,0
Coût réduit du Ministère	s/o	(2,0)	(2,0)
Economies en approvisionnement ¹	s/o	(0,5)	-
- Investissement social	s/o	(0,1)	-
- Innovation et politiques en matière de développement social	s/o	(2,5)	-
- Prestation de services	s/o	(3,1)	-
Total - Economies en approvisionnement	s/o	-	-
Total des ajustements	332,9	1 603,3	1 163,0
Dépenses nettes prévues	29 832,6	33 505,4	36 354,3

- Pour 2007-2008, on prévoit des dépenses consolidées de 19 979,0 millions de dollars, soit 259,7 millions de dollars de plus que les dépenses prévues en 2006-2007. Cet écart est principalement attribuable aux facteurs suivants :
- baisse nette de 42,3 millions de dollars des dépenses de fonctionnement, surtout par suite de diminutions respectives de 22,2 millions de dollars dans l'administration de l'Initiative nationale pour les sans-abri, de 8,5 millions de dollars en frais ponctuels liés à la conclusion de l'entente sur le développement du marché du travail avec l'Ontario, de 7,5 millions de dollars par une affectation du Plan de publicité gouvernementale, de 6,2 millions de dollars dans l'épargne-études du Bon d'études canadien et de la Subvention canadienne pour l'épargne-études et de 5,6 millions de dollars pour la nouvelle initiative de recouvrement dans le cadre du Programme canadien de prêts aux étudiants. Ces baisses sont contrebalancées par une hausse de 5,0 millions de dollars pour l'Agence d'évaluation et de reconnaissance des titres de compétence étrangers;
- baisse de 83,2 millions de dollars des subventions et contributions votées surtout à cause de diminutions respectives de 138,3 millions de dollars pour l'Initiative nationale pour les sans-abri et de 9,6 millions de dollars pour le Forum urbain mondial, diminution contrebalancée par une hausse de 75,0 millions de dollars pour la Subvention aux apprentis annoncée dans le budget de 2006;
- baisse de 17,8 millions de dollars des paiements législatifs surtout en raison de la Subvention canadienne pour l'épargne-études (15,0 millions de dollars) dans un contexte de stabilisation de l'industrie des REEE depuis l'introduction de la SCFE bontifiée en 2005;
- baisse nette de 212,4 millions de dollars des prêts versés en vertu de la *Loi canadienne sur l'aide financière aux étudiants*, ce qui s'explique principalement par l'effet des remboursements d'emprunts dans ce portefeuille;
- hausse de 618,3 millions de dollars pour le Compte d'assurance-emploi principalement en raison de l'augmentation des prestations prévues (616,0 millions de dollars) de la partie I de la *Loi sur l'assurance-emploi*;
- Pour 2008-2009, on prévoit que les dépenses consolidées seront de 20 288,1 millions de dollars, soit 309,1 millions de dollars de plus que les dépenses prévues en 2007-2008. Cet écart est principalement attribuable aux facteurs suivants :
- baisse nette de 22,1 millions de dollars des dépenses de fonctionnement principalement à cause de réductions respectives pour l'administration de la Stratégie des métiers et de l'apprentissage (7,0 millions de dollars), l'Initiative des compétences en milieu de travail (5,6 millions de dollars), l'Agence d'évaluation et de reconnaissance des titres de compétence étrangers (3,0 millions de dollars), le Programme national d'alphabétisation (1,9 million de dollars), les Partenariats pour les compétences et l'emploi des Autochtones (1,7 million de dollars) et les Communautés minoritaires de langue officielle (1,6 million de dollars);
- baisse de 84,3 millions de dollars des subventions et contributions votées principalement à cause de réductions respectives pour l'Initiative des compétences en milieu de travail (37,7 millions de dollars), les Partenariats pour les compétences et l'emploi des Autochtones (18,2 millions de dollars), le Programme national d'alphabétisation (13,8 millions de dollars), les Communautés minoritaires de langue officielle (12,0 millions de dollars) et le Fonds d'infrastructure des centres de formation (4,2 millions de dollars);
- hausse de 29,5 millions de dollars des paiements législatifs surtout en raison de l'utilisation accrue de la Subvention canadienne pour l'épargne-études (15,0 millions de dollars) et du Bon d'études canadien (9,0 millions de dollars), ainsi que des améliorations qui visent à réduire la contribution parentale dans le Programme canadien de prêts aux étudiants et qui ont été annoncées dans le budget de 2006 (5,0 millions de dollars);
- baisse nette de 208,3 millions de dollars des prêts versés en vertu de la *Loi canadienne sur l'aide financière aux étudiants*, ce qui s'explique principalement par l'effet des remboursements d'emprunts dans ce portefeuille;
- hausse de 596,0 millions de dollars du Compte d'assurance-emploi principalement à cause d'une augmentation des prestations prévues (603,0 millions de dollars) de la partie I de la *Loi sur l'assurance-emploi*;

- Secrétariat national à l'alphabétisation pour la promotion de l'alphabétisation en milieu de travail (8,6 millions de dollars);
- Programme de reconnaissance des titres de compétence étrangers (6,9 millions de dollars) en vue de collaborer avec les partenaires et les intervenants afin d'aider les immigrants à optimiser leurs compétences et leur contribution au marché du travail canadien;
- Forum urbain mondial à Vancouver en 2006 (4,7 millions de dollars), manifestation internationale portant sur la ville, le logement et l'urbanisation;
- Initiative des conseils sectoriels (4,0 millions de dollars) en vue de subventionner les activités de conseils sectoriels dans les domaines nouveaux et exemplaires à favoriser l'acquisition de compétences et l'apprentissage sur le marché du travail canadien;
- Fonds d'infrastructure des centres de formation (3,7 millions de dollars) en vue de subventionner des centres de formation patronaux-syndicaux pour l'achat de machines et de matériel nouveaux pour les métiers caractérisés par une forte évolution technologique, l'élargissement des activités ou la mise en place de nouveaux programmes pédagogiques;
- Bon d'études canadien et Subvention canadienne pour l'épargne-études (3,0 millions de dollars);
- Groupe de partenaires du milieu de travail (2,0 millions de dollars) en vue de la création d'une tribune nationale en vue d'intensifier la participation de l'industrie, assurer une visibilité, favoriser la responsabilisation et la mobilisation et produire et diffuser de l'information sur les compétences en milieu de travail;
- Agence d'évaluation et de reconnaissance des titres de compétence étrangers (1,0 million de dollars) annoncée dans le budget de 2006 en vue de faciliter les consultations et de faire les premiers pas dans la voie menant à la création d'un organisme canadien chargé d'évaluer et de reconnaître les titres de compétence acquis à l'étranger par les immigrants;
- Administration régionale Kativik (1,0 million de dollars) pour les programmes d'emploi des Inuits avec les programmes et les services d'emploi courants, le financement des services de garde d'enfants et le financement complémentaire de programmes spéciaux de formation qui qualifieront les Inuits pour les emplois créés par les projets en place ou en chantier sur le territoire de l'Administration régionale Kativik;
- Administration régionale crie (1,0 million de dollars) pour la réalisation de programmes territoriaux (baie James) de développement des compétences dans des domaines aussi divers que le tourisme, les aménagements hydroélectriques, la construction et l'exploitation forestière.
- Ces hausses sont contrebalancées par une baisse de 60,0 millions de dollars par suite du transfert de l'Initiative de revitalisation du secteur riverain de Toronto et une diminution de 20,1 millions de dollars dans le cadre de l'Initiative nationale pour les sans-abri;
- hausse de 219,7 millions de dollars des paiements législatifs principalement en raison de l'établissement du Bon d'études canadien (42,8 millions de dollars), de la bonification et de l'utilisation croissante de la Subvention canadienne pour l'épargne-études (112,5 millions de dollars), de l'extension du Programme canadien de prêts aux étudiants (34,5 millions de dollars) et de la mise en place du Programme de protection des salariés (28,7 millions de dollars) qui vise à verser à un certain nombre de salariés de sociétés en faillite les salaires et les indemnités de vacances non réglés jusqu'à concurrence de 3 000 \$;
- baisse nette de 349,8 millions de dollars des prêts versés en vertu de la *Loi canadienne sur l'aide financière aux étudiants*, ce qui s'explique principalement par l'effet des remboursements d'emprunts dans ce portefeuille;
- hausse de 158,1 millions de dollars des dépenses prévues au Compte d'assurance-emploi.

Principales données financières

- Les dépenses consolidées relevant de Ressources humaines et Développement des compétences Canada devraient atteindre 19 719,3 millions de dollars en 2006-2007, soit 76,2 millions de dollars de plus que le total des dépenses autorisées de 19 643,1 millions de dollars en 2005-2006. Cet écart est principalement attribuable aux facteurs suivants :
- hausse de 31,3 millions de dollars des dépenses nettes de fonctionnement en raison principalement des facteurs suivants :
 - ressources administratives supplémentaires de 24,8 millions de dollars pour des programmes comme les suivants :
 - Stratégie des métiers et de l'apprentissage (8,8 millions de dollars) pour la collaboration avec les provinces, les territoires et les intervenants au renforcement de l'apprentissage dans les 45 métiers du Programme du Sceau rouge;
 - Initiative des compétences en milieu de travail (5,7 millions de dollars) pour la mise en œuvre de ce programme, ce qui comprend des activités d'évaluation de projets, de gestion d'appels de propositions, de reddition de comptes, de contrôle de conformité et d'évaluation;
 - Programme de protection des salariés (3,2 millions de dollars) qui vise à verser à un certain nombre de salariés de sociétés en faillite des salaires et des indemnités de vacances non réglés jusqu'à concurrence de 3 000 \$;
 - nouveau Bon d'études canadien et Subvention canadienne pour l'épargne-études bontifiée (2,8 millions de dollars);
 - Secrétariat national à l'alphabétisation (2,0 millions de dollars) en vue de l'élaboration d'une stratégie nationale en matière d'alphabétisation et de compétences essentielles;
 - Portail immigration (1,3 million de dollars) pour la création d'une information à l'intention des immigrants éventuels ou nouveaux sur l'évaluation des titres de compétence et les possibilités d'emploi;
 - Agence d'évaluation et de reconnaissance des titres de compétence étrangers (1,0 million de dollars), mesure annoncée dans le budget de 2006 en vue de faciliter les consultations et de faire les premiers pas dans la voie menant à la création d'un organisme canadien chargé d'évaluer et de reconnaître les titres de compétence acquis à l'étranger par les immigrants;
 - hausse des coûts par suite de la conclusion avec l'Ontario d'une entente sur le développement du marché du travail (8,5 millions de dollars);
 - affectation relative au Plan de publicité gouvernementale et aux campagnes d'information publique (1,0 million de dollars).
 - Ces hausses sont contrebalancées par ce qui suit :
 - baisse des coûts du nouveau ministère par réduction du cabinet ministériel (0,8 million de dollars);
 - économies à réaliser par la réduction des dépenses en marchés publics (1,4 million de dollars).
 - hausse de 20,6 millions de dollars des subventions et contributions votées surtout pour ce qui suit :
 - hausses pour des programmes nouveaux ou améliorés :
 - Initiative des compétences en milieu de travail (34,7 millions de dollars) en vue de contribuer à des projets en partenariat visant à expérimenter de nouvelles façons d'encourager les employeurs à investir dans le développement des compétences en milieu de travail, surtout dans la petite et moyenne entreprise;
 - établissement de la Subvention aux apprentis annoncée dans le budget de 2006 (25,0 millions de dollars);

TABLEAU 1A : RESSOURCES HUMAINES ET DÉVELOPPEMENT DES COMPÉTENCES CANADA

(suite)

Activités de programmes (en millions de dollars)	Budget des dépenses		
	2005-2006	2006-2007	2007-2008
Autorisations totales	Dépenses prévues	2006-2007	2007-2008
Agence de reconnaissance des titres de compétence	s/o	2,0	10,0
Projet pilote de l'assurance-emploi - Période additionnelle de cinq semaines	s/o	0,1	0,1
Plan de publicité du gouvernement du Canada	s/o	(0,5)	-
Administration régionale Crie	s/o	6,9	-
Jeux olympiques d'hiver 2010	s/o	0,2	0,2
Partenaires du milieu de travail	s/o	2,0	-
Stratégie des compétences en milieu de travail	s/o	0,3	-
Programme de protection des salaires	s/o	32,2	32,2
Compétences en milieu de travail - Stratégie des métiers d'apprentissage	s/o	-	-
AE - Prestations de compassion	s/o	-	2,6
Montant brut	s/o	0,7	0,7
Recettes provenant du compte d'a-e	s/o	(0,7)	(0,7)
Partenariat pour les compétences et l'emploi des Autochtones	s/o	5,3	-
Coût réduit du Ministère - Cabinet réduit	s/o	(0,9)	(0,9)
Prêts canadiens des étudiants - Radiation de dettes	s/o	0,4	-
EDMT avec l'Ontario - Coûts du réaménagement des effectifs	s/o	8,5	-
EDMT avec l'Ontario - Frais d'administration de l'AE	s/o	8,6	8,6
Montant brut	s/o	8,6	8,6
Recettes provenant du compte d'a-e	s/o	(8,6)	(8,6)
Total des ajustements	387,2	54,7	43,6
Total dépenses prévues (nettes)	3 614,5	3 511,3	3 065,6
Comptes à fins déterminées	16 111,6	16 260,7	16 877,4
Assurance-emploi (a-e)	16 111,6	16 260,7	16 877,4
Autres comptes à fins déterminées	51,4	48,3	45,4
Recouvrements ministériels imputés au Régime de pensions du Canada (RPC)	15,3	14,7	14,7
Régime ministériel des avantages sociaux des employés récupérables du	(149,7)	(140,7)	(139,1)
Compte d'assurance-emploi	(149,7)	(140,7)	(139,1)
Total consolidé pour RHDCC	19 643,1	19 694,3	19 864,0
Moins : Recettes non disponibles	549,6	648,5	733,1
Plus : Services reçus sans frais	17,9	17,7	16,4
Total de RHDCC	20 210,6	20 360,5	20 613,5
Équivalents temps plein	17 094	18 068	17 514
			17 366

^a Les économies en approvisionnement brutes pour 2006-2007 totalisent 10,1 millions de dollars. Après les recouvrements au Compte d'assurance-emploi de 8,2 millions de dollars, la portion du Trésor (ou nette) s'élève à 1,8 million de dollars.

Tableaux financiers

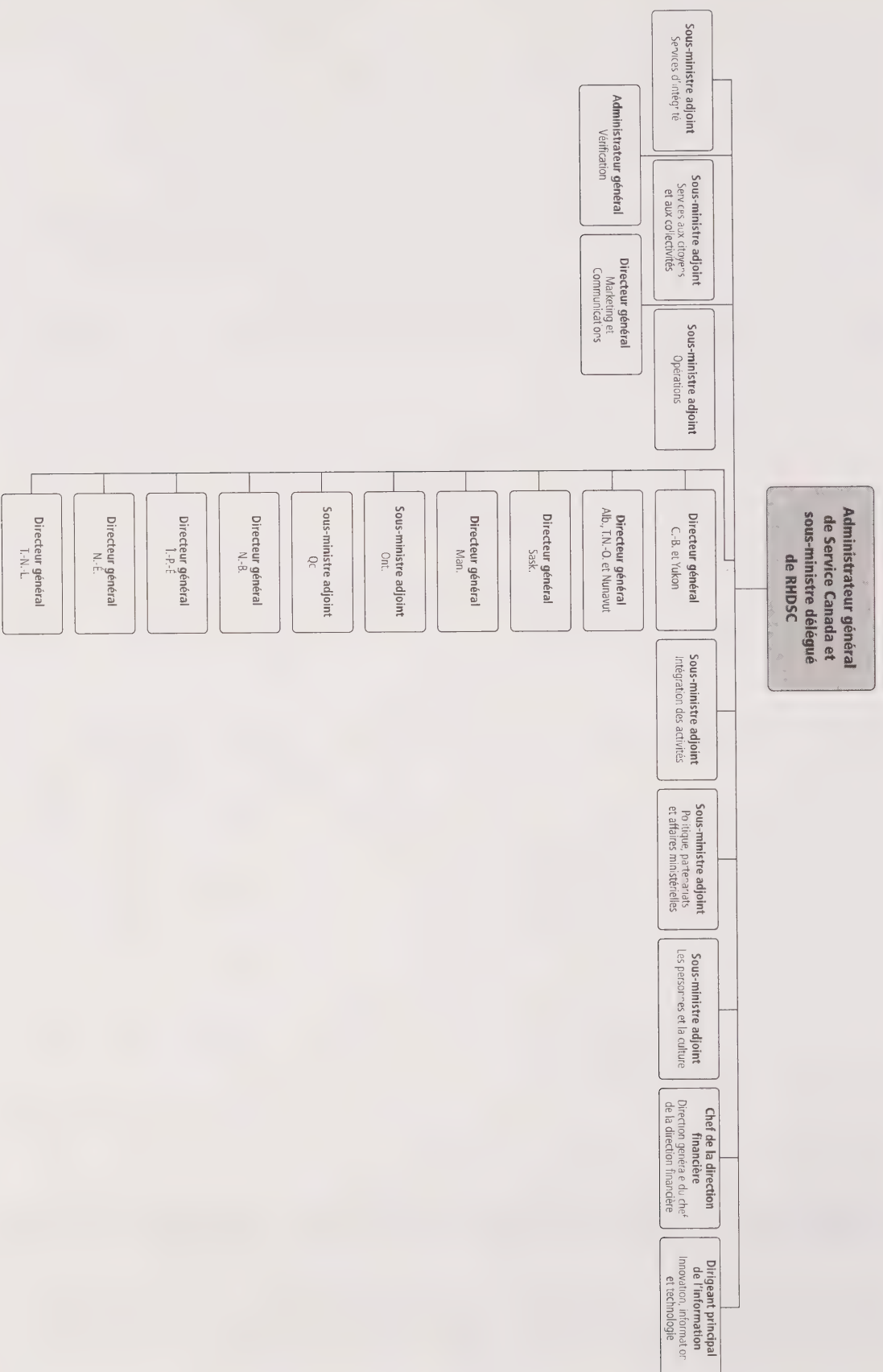
À noter que, dans les tableaux financiers de cette section, nous présentons des chiffres distincts pour Ressources humaines et Développement Canada et Développement social Canada par souci de nous aligner sur le Budget principal des dépenses 2006-2007.

TABLEAU 1A : RESSOURCES HUMAINES ET DÉVELOPPEMENT DES COMPÉTENCES CANADA

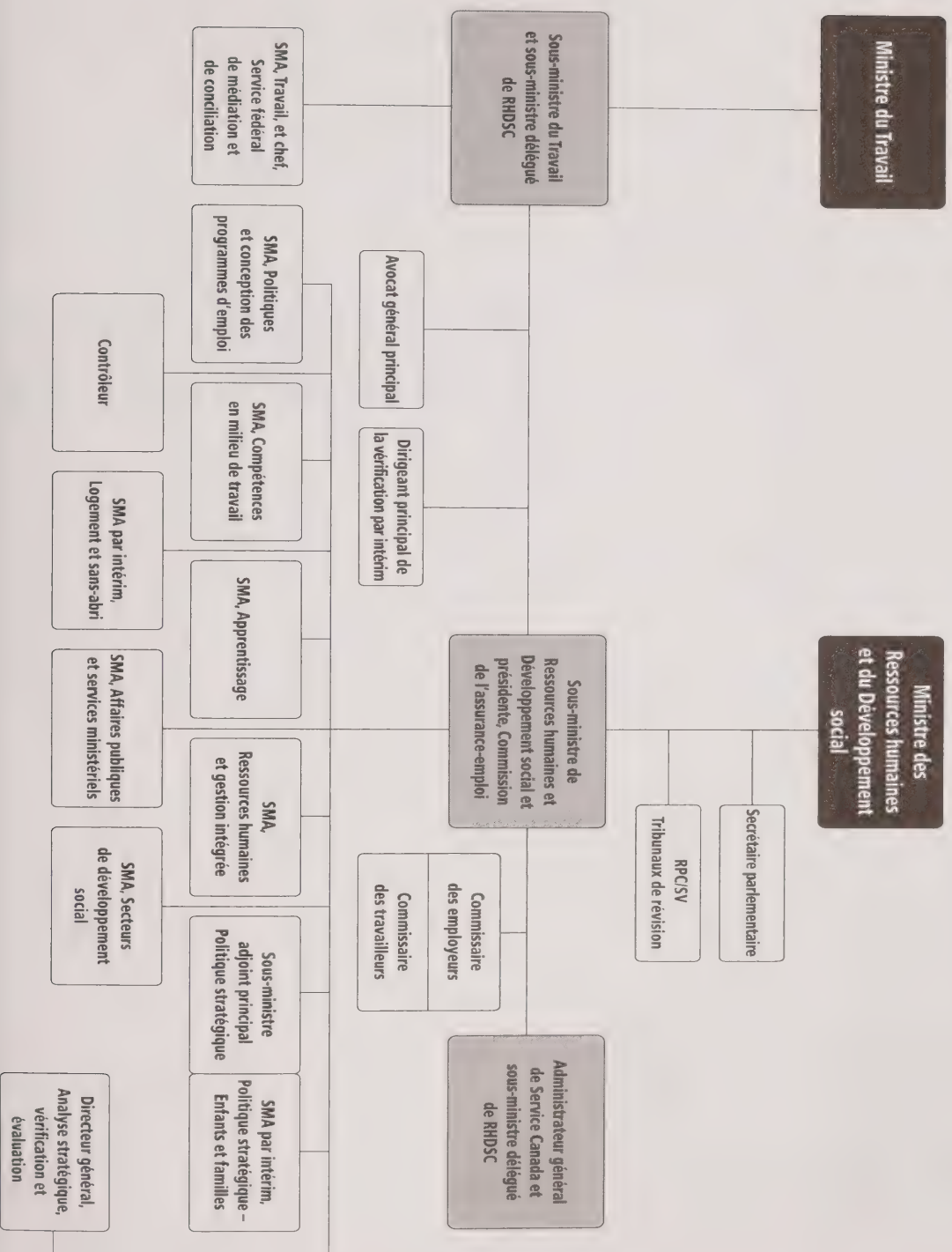
DÉPENSES PRÉVUES ET ÉQUIVALENTS TEMPS PLEIN

Activités de programmes (en millions de dollars)			
2005-2006		2006-2007	
Autorités totales		Dépenses prévues	
Budgétaire : Budget des dépenses			
Assurance-emploi	804,9	883,5	880,7
Programmes d'emploi	893,0	969,1	968,6
Compétences en milieu de travail	168,8	184,5	181,7
Apprentissage	929,5	1 226,9	1 193,0
Travail	205,8	217,3	222,2
Sans-abri	180,0	188,3	3,3
Soutien aux politiques et aux programmes	232,7	103,2	89,6
Prestation des services	118,8	128,1	128,7
Dépenses brutes du Budget des dépenses			
	3 533,5	3 900,9	3 667,8
Moins : Recettes disponibles	(1 347,0)	(1 425,8)	(1 414,9)
Dépenses nettes			
	2 186,5	2 475,1	2 252,9
Non budgétaire			
Prêts consentis en vertu de la Loi fédérale sur l'aide financière aux étudiants (LFAFE)			
	1 040,8	981,5	769,1
Ajustements budgétaires :			
Mandats spéciaux de la Gouverneure générale			
Autres :	53,7	-	-
- Transferts entre les budgets de fonctionnement - gels	(0,7)	-	-
- Report - Trésor	(5,9)	-	-
- Comité d'examen des dépenses - épargne ministériel	(6,0)	-	-
- Crédit 5 du CT	0,3	-	-
- Régime d'avantages sociaux des employés (RASE)	(2,2)	-	-
Sous-total - Autres	(14,5)	-	-
Redressements législatifs aux fins des comptes publics - budgétaires			
	57,5	-	-
Redressements législatifs aux fins des comptes publics - non-budgétaires			
	290,5	-	-
Economies en approvisionnement^a			
- Assurance-emploi	s/o	(0,4)	-
- Programmes d'emploi	s/o	(0,4)	-
- Compétences en milieu de travail	s/o	(0,1)	-
- Apprentissage	s/o	(0,2)	-
- Travail	s/o	(0,3)	-
- Sans-abri	s/o	(0,1)	-
- Soutien aux politiques et aux programmes	s/o	(0,1)	-
- Prestation des services	s/o	(0,2)	-
Sous-total - Economies en approvisionnement	s/o	(1,8)	-

RHDSC – Service Canada



Ressources humaines et Développement social Canada



Information sur l'organisation

RENSEIGNEMENTS SUPPLÉMENTAIRES



SERVICE CANADA : Finances et Ressources Humaines - Dépenses prévues

Coûts bruts de fonctionnement Ressources financières (en millions de dollars)	De:			Équivalent temps pleins - Total
	2006-2007	2007-2008	2008-2009	
Marché du travail	1 259,9	1 246,2	1 252,7	
Compétences en milieu de travail	53,1	52,6	50,7	
Logement et sans-abri	22,8	1,5	1,5	
Prestation des services	556,5	558,2	560,7	
Total Service Canada	1 892,3	1 858,5	1 865,6	
Service décloisonné et axé sur les citoyens	888,5	863,1	862,8	
Intégrité	974,3	966,1	973,4	
Services gouvernementaux fondés sur la collaboration et structures en réseau	29,5	29,3	29,4	
Total Service Canada	1 892,3	1 858,5	1 865,6	

SERVICE CANADA
Profil des dépenses du RPP 2006-2009
 (En millions de dollars)

Dépenses prévues			
2006-2007	2007-2008	2008-2009	
Budgétaires			
Coûts nets de fonctionnement (Crédits 1&10) ^a			
563,3	532,0	540,9	
Coûts de livraison du:			
° Compte d'assurance-emploi	1 138,4	1 133,8	
° Régime de pension du Canada	190,6	190,9	
Sous-total ^a	1 329,0	1 324,7	
Coûts bruts de fonctionnement ^a			
1 892,3	1 858,5	1 865,6	
Livré pour Ressources humaines et développement social Canada ^c			
686,1	558,4	545,5	
Subventions et contributions autorisées (Crédits 5&15)			
Autres paiements législatifs:			
° Programmes de la Sécurité de la Vieillesse	23 255,0	24 139,0	
° Supplément de revenu garanti	6 820,0	7 219,0	
° Paiements d'allocation	500,0	537,0	
Sous-total des autres paiements législatifs	30 575,0	31 895,0	
Prestations du Régime de pensions du Canada	26 132,3	27 496,8	
Prestations d'assurance-emploi	12 442,0	13 058,0	
° Partie I	2 048,9	2 048,8	
° Partie II	14 490,9	15 106,8	
Sous-total des prestations d'assurance-emploi	14 490,9	15 106,8	
EDMT - Amélioration des systèmes	7,6	11,1	
EDMT - Réaménagement	1,0	-	
Total des paiements de transfert législatifs	71 206,8	74 509,7	
Total consolidé			
73 785,2	76 926,6	80 409,9	

a. Les coûts nets de fonctionnement et les coûts de livraison pour les dépenses prévues de l'année 2005-2006 pour Service Canada sont respectivement de 515,6 million de dollars et 1 396,0 million de dollars. Le total des dépenses prévues pour les coûts bruts de fonctionnement pour l'année 2005-2006 est de 1 911,6 million de dollars.

b. Comprend les postes législatifs pour le régime d'avantages sociaux et pour les paiements aux agences de recouvrement privées 18,5 million de dollars (21,0 million de dollars en 2007-2008 et 23,3 million de dollars en 2008-2009).

c. La stratégie financière de Service Canada établie que les fonds législatifs incluent les prestations d'assurance-emploi, les prestations du Régime de pensions du Canada, le programme de la sécurité de la vieillesse et les subventions et contributions autorisées liées à la livraison de programmes spécifiques seront alloués à Service Canada annuellement par Ressources humaines et Développement social Canada.

d. Les canadiens bénéficient directement de ce montant et livrées pour Ressources humaines et Développement social Canada.

SERVICE CANADA : RESSOURCES FINANCIÈRES ET HUMAINES – DÉPENSES PRÉVUES

Les deux tableaux financiers qui suivent s'alignent sur le Budget principal des dépenses 2006-2007 de RHDSC.

Ressources financières et humaines			
Dépenses prévues			
Ressources financières (en millions de \$)			
2006-2007	2007-2008	2008-2009	
Ressources Humaines et Développement des Compétences Canada			
Dépenses de fonctionnement brutes	110,4	110,8	
Développement Social Canada			
Dépenses de fonctionnement brutes	447,1	449,9	
Ressources humaines			
Total	558,2	560,7	
			Equivalents temps plein
	6 305	6 231	6 234

Ressources financières détaillées par programmes ou service			
Ressources financières (en millions de dollars)			
2006-2007	2007-2008	2008-2009	
Prestation de services - Ressources Humaines et Développement des Compétences Canada			
75,8	75,4	75,3	
Répartition des services ministériels ^a			
33,6	35,0	35,5	
Total partiel			
109,4	110,4	110,8	
Prestation de services - Développement Social Canada			
447,1	447,8	449,9	
Total ^b			
556,5	558,2	560,7	
			Equivalents temps plein
	6 305	6 231	6 234

^a La portion des services ministériels liés au bureau du Ministre, au bureau du Sous-Ministre, au bureau du Contrôleur et des Services partagés a été divisée entre chaque Résultat stratégique.

^b Ceci représente les ressources de Service Canada pour l'exécution des programmes et des services. Pour de plus amples renseignements au sujet des opérations de Service Canada, s'il-vous-plait voir le tableau suivant.

Résultat
stratégique

Améliorer les résultats des Canadiens grâce à l'excellence du service

Indicateurs
de service

- Augmentation du nombre de points de prestation de services
- Disponibilité d'intermet 24 heures sur 24 et 7 jours sur 7 - renseignements et les opérations.
- Pourcentage d'appels auxquels un agent a répondu dans les 180 secondes.
- Prolongation des heures d'activité des centres de Service Canada.
- Pourcentage de disponibilité du Système de réponse vocale interactive.
- Maintien ou réduction du nombre de plaintes en matière de des communautés minoritaires de langue officielle.
- Établissement de points de prestation de services à l'intention des communautés minoritaires de langue officielle.
- Prestation de services dans des langues autres que le français et l'anglais.
- Disponibilité de formulaires en ligne sous des formes accessibles aux personnes handicapées.
- Pourcentage d'avis produits dans les sept jours suivant la réception des demandes.
- Pourcentage de 28 jours suivant la déclaration.
- Pourcentage de passeports délivrés dans les 20 jours ouvrables suivant la réception de la demande de Service Canada, sans compter le délai de traitement par la poste.
- Pourcentage de production du premier paiement à la retraite de du Régime de pensions du Canada dans les mois suivant l'admission aux prestations.
- Pourcentage de premiers paiements de Sécurité de la vieillesse dans les 30 jours suivant l'obtention du droit aux prestations.
- Pourcentage de permis de navigation de plaisance délivrés en une visite.
- Pourcentage de numéros d'assurance sociale attribués en une visite.
- Maintien ou augmentation de la satisfaction des clients.

Résultats
prévus

- Service plus adapté aux citoyens
- Résultats améliorés de la prestation des services
- Alignement des résultats des services et des politiques
- Accroissement de la présence régionale
- Image de marque forte et positive de Service Canada

Activités de
programme

Service décloisonné et axé sur le citoyen

Services gouvernementaux fondés sur la collaboration et structures en réseau

Intégrité

Priorités

Reconnaître et récompenser une culture d'excellence du service

Transformer le service aux Canadiens

Réaliser l'intégration des clients

Renforcer la responsabilité et la transparence

Plans

Orientation de la
gestion ministérielle
financière.

Amélioration de la gestion et de la responsabilisation en matière

- Cultiver l'excellence du service.
- Établir l'excellence du service.
- Récompenser l'excellence du service.

- Appliquer nos stratégies de prestation de services aux communautés ou groupes de clients.
- Faire du développement d'activités et de produits.
- Accroître notre présence régionale et locale.
- Intégrer les centres d'appels.
- Édifier nos capacités en tant que réseau de prédilection du gouvernement du Canada.
- Renouveler les services Internet et Intranet.
- Elaborer des stratégies de collaboration (partenariats).

- Établir une perspective clientèle unique et assurer l'intégration de l'information.
- Assurer l'automatisation du traitement.
- Transformer la gestion des données de l'état civil.

- Établir le principe de l'intégrité de la gestion des risques dans toute l'entreprise.
- Tenir nos engagements en matière d'économies.
- Rendre compte du respect de nos engagements aux Canadiens et aux parlementaires.

- Service Canada recueillera l'information à la source dans la mesure du possible. En transformant la gestion des données de l'état civil, il réunira directement à la source les renseignements recherchés sur les naissances, les décès et les mariages. Il étendra cette collecte à l'information relative aux nouveaux Canadiens à leur arrivée au pays.
- Service Canada a un effet de levier sur le potentiel de collaboration gouvernementale dans la création de valeur pour les Canadiens. Il s'agit de consolider l'action gouvernementale et la fédération canadienne et de permettre aux pouvoirs publics de travailler ensemble au mieux des intérêts des Canadiens. Comme finalité de cette collaboration, il y a le désir commun de mieux se mettre au service de la population du pays et d'en améliorer les résultats.

UN GOUVERNEMENT QUI FAVORISE LA COLLABORATION ET LE RÉSEAUTAGE : PRIORITÉS ET PLANS

Priorité : Transformer les services aux Canadiens.	
Plans : <ul style="list-style-type: none"> • Acquérir les moyens nécessaires pour devenir le réseau de prédilection du gouvernement du Canada. • Elaborer des stratégies de collaboration. 	Priorité : Réaliser l'intégration de l'information des clients.
Plans : <ul style="list-style-type: none"> • Etablir une perspective client unique et assurer l'intégration de l'information. • Assurer l'automatisation du traitement. • Transformer la gestion des données de l'état civil. 	

Modalités des services communs

Outre ses fonctions internes de prestation de services, Service Canada procurera à RHDSC les services RHDSC de ressources humaines, de technologies de l'information et de services administratifs et financiers. Comme fournisseur de services communs, son but est de réunir les fonctions auxiliaires communes et d'accroître l'efficacité et la rentabilité des services en question.

INTÉGRITÉ : PRIORITÉS ET PLANS

Priorité : Renforcer la responsabilisation et la transparence.
Plans : <ul style="list-style-type: none"> • Etablir le principe de l'intégrité à l'échelle de l'entreprise. • Tenir les engagements en matière d'économies.

ACTIVITÉ DE PROGRAMMES : UN GOUVERNEMENT QUI FAVORISE LA COLLABORATION ET LE RÉSEAUTAGE

Service Canada est le premier fournisseur de services en importance au pays. C'est l'organisme qui est le plus présent sur le territoire canadien. Il exploite le service téléphonique gouvernemental 1 800 O-Canada. Il reçoit 80 % des appels téléphoniques qui n'ont pas à voir avec l'impôt et il gère enfin le site Internet canada.gc.ca. Il est idéalement placé pour être le réseau de prédilection du gouvernement canadien, mais il sait qu'il existe d'autres réseaux de prestation de services. Il deviendra ce réseau d'excellence en créant un service gouvernemental en collaboration et en réseau dans lequel s'harmoniseront tous ces autres réseaux avec Service Canada au cœur du système. Il lui faut à cette fin faciliter l'accès à son réseau, l'élargir par de nouveaux partenariats et investir dans les canaux de prestation de services de manière à mettre le citoyen au centre du système.

Dans la prochaine année, il prévoit faciliter l'accès au réseau en collaboration pour les gouvernements. Ce réseau est un atout important qui peut être érigé en réseau de prestation de services essentiels aux Canadiens partout où ils vivent. En s'appuyant sur le réseau en place et sa capacité de diffuser de l'information dans tout le pays, Service Canada créera un service de protection civile et apportera aide et soutien en cas d'urgence ou de crise locale ou nationale. Pour offrir cette nouvelle gamme de services, il collaborera avec d'autres ministères fédéraux comme Sécurité publique et Protection civile Canada.

Il prévoit étendre son réseau par des partenariats nouveaux ou élargis. Il continuera à créer de la valeur pour les ministères fédéraux. Il prévoit conclure et appliquer trois nouvelles ententes. De plus, il accroîtra sa collaboration avec les provinces en matière de prestation de services. Déjà, sa collaboration s'étend au Nouveau-Brunswick et à l'Ontario et, avec les trois nouvelles ententes envisagées, il prévoit aménager un réseau pannational de prestation de services en collaboration.

Il dispose de trois plans d'investissement dans les canaux de prestation de services pour que l'information clientèle soit pleinement intégrée et que le citoyen se trouve au centre d'un réseau fonctionnant en collaboration de classe internationale.

- Il établira une « perspective client unique » pour la prestation de services. Pour les services à rendre aux Canadiens, il faut être capable de voir l'information du point de vue du citoyen. Avec cette perspective unique, Service Canada transformera sa façon d'aborder les services, de sorte que les secteurs isolés de programme soient éliminés et que l'organisme devienne l'expert de la collecte, de l'utilisation et de l'intégration des données en fonction des besoins des Canadiens. Dans cette perspective, l'information sera recueillie une seule fois, la protection des renseignements personnels sera meilleure et les Canadiens pourront aisément trouver les programmes et les services au même endroit. Les services aux Canadiens se transformeront, pendant que Service Canada allégera nettement le fardeau administratif et rendra le gouvernement plus efficace en tout respect des lois et des pratiques en matière de protection de la vie privée.

- Service Canada automatisera le traitement de l'information. Déjà, il a répondu au besoin exprimé par les Canadiens de recevoir par Internet des services supérieurs en qualité, en rapidité et en commodité. Il étendra encore plus l'application d'une information réunie par voie électronique en automatisant et en renforçant la capacité des systèmes opérationnels en place à éliminer les procédés inutiles et à s'automatiser au mieux.

SERVICES TRANSPARENTS AXÉS SUR LE CITOYEN : PRIORITÉS ET PLANS

Priorité : Transformer le service aux Canadiens.	
Plans :	<ul style="list-style-type: none"> • Appliquer les stratégies de prestation de services aux communautés ou groupes de clients. • Faire du développement d'activités et de produits. • Accroître la présence régionale et locale. • Intégrer les centres d'appels. • Renouveler les services Internet et Intranet.
Priorité : Reconnaître et récompenser une culture d'excellence du service.	
Plans :	<ul style="list-style-type: none"> • Cultiver l'excellence du service. • Établir l'excellence du service. • Récompenser l'excellence du service.
Priorité : Renforcer la responsabilisation et la transparence.	
Plans :	<ul style="list-style-type: none"> • Rendre compte du respect des engagements aux Canadiens et aux parlementaires.

ACTIVITÉ DE PROGRAMMES : INTÉGRITÉ

Comme Service Canada verse chaque année pour 70 milliards de dollars de prestations aux Canadiens, il doit veiller à ce que ces prestations sont du bon montant, sont versées aux bonnes personnes et servent aux fins prévues. Dans sa reddition de comptes, Service Canada doit absolument montrer que son organisation est intégrée et qu'il a fait une saine gestion à titre d'organisme qui est le fournisseur des services offerts par le gouvernement du Canada. Service Canada doit montrer qu'il comprend les risques liés à son succès et bien gérer ces risques. Il doit aussi veiller à ce que la surveillance et la mesure de ses réalisations reposent sur des méthodes rigoureuses et des données fiables. Il lui faut absolument établir une stratégie solide et rigoureuse en matière d'intégrité pour offrir un service axé sur les citoyens, améliorer la confiance du public dans son gouvernement et réaliser des économies pour les contribuables.

Au cours des trois prochaines années, Service Canada mènera en priorité diverses initiatives destinées à améliorer la responsabilisation et la transparence :

- Il établira le principe de l'intégrité à l'échelle de l'organisation. Il doit s'assurer que, chaque année, les prestations qui sont versées sont du bon montant, vont aux bonnes personnes et servent aux fins prévues. Pour ce faire, Service Canada doit être convaincu que ses stratégies de gestion des risques sont efficaces, que son travail répond à de hautes normes de qualité et que l'information servant à déterminer l'identité de ses clients et à déclarer ses réalisations est digne de foi. Il s'agit de renforcer les mécanismes des numéros d'assurance sociale (NAS), du Registre de l'assurance sociale (RAS) et les modèles d'authentification comme clé d'accès aux programmes et aux services. Une autre priorité est d'accroître les capacités d'analyse des risques et d'implanter un cadre général de contrôle de la qualité, le but étant respectivement d'améliorer et de mesurer la conformité et la précision dans le versement des prestations.

- Il faut optimiser les économies et, à cette fin, offrir les services avec efficacité et au meilleur coût, et contrôler et détecter les paiements erronés ou illégitimes compte tenu des engagements de Service Canada en matière d'économies. À cette fin, il faut s'appuyer sur les mécanismes nécessaires à la réalisation, à la surveillance et à la déclaration des progrès. Si Service Canada a atteint cette année son objectif d'épargne, il est essentiel qu'il garde le cap et tienne ses engagements pour la deuxième année et les années qui suivront de manière à se rendre plus crédible encore auprès des Canadiens et à démontrer le sérieux de sa gestion et de sa reddition de comptes.

Au cours des trois prochaines années, Service Canada appliquera cinq plans essentiels de transformation de ses services aux Canadiens :

- Il appliquera une stratégie dite des communautés ou groupes de clients, laquelle consiste notamment à trouver des modèles dans les divers segments de la clientèle, à améliorer les services offerts et en créer d'autres et à renforcer la capacité de comprendre, d'étudier et d'analyser les besoins des clients. Il constituera des comités consultatifs dans ces communautés de clients pour l'information, l'évaluation et la participation à la mise en place de services plus utiles et plus adaptés aux secteurs de la clientèle. Grâce à cette initiative, on comprendra mieux les besoins des groupes de clients et on se dotera de stratégies permettant de se mettre efficacement à leur service.
- Il s'agira aussi de concevoir des activités et des produits de façon à ne plus compter sur des procédés et des méthodes fondées sur les programmes et l'élaboration de programmes pour en adopter d'autres qui sont axés sur des gammes de services en fonction des besoins des Canadiens.
- Service Canada étendra son réseau de services régionaux et locaux et assurera le choix et l'accès là où vivent les Canadiens. Pour ce faire, il doublera le nombre de points de prestation de services, élaborera un nouveau modèle pour les services au comptoir et créera une image de marque homogène dans tout le réseau. Cette amélioration réaffirmera le rôle de Service Canada comme réseau de prédilection du gouvernement du Canada.
- Service Canada renforcera la voie téléphonique comme premier mode de communication aux yeux des Canadiens en mettant en place un réseau intégré de centres d'appels qui, par un numéro unique, fournira des services par téléphone à la population. Il positionnera son service téléphonique pour l'avenir de façon à mieux offrir ses services axés sur le citoyen et à offrir des services téléphoniques à l'intention d'autres organismes ou partenaires.
- Service Canada renouvellera les services Internet et Intranet pour que le citoyen ait un meilleur accès aux programmes et aux services. La voie Internet est l'épine dorsale même de l'information sur les programmes et les services et du service électronique à la population. En ayant désormais accès à un site Web de classe internationale entièrement intégré et avec une orientation « service à la clientèle », les Canadiens seront en mesure d'entrer en interaction avec le gouvernement avec plus de rapidité, de facilité et d'efficacité.

Le service est important pour les Canadiens. La recherche indique que le lien est étroit entre l'efficacité des services et la confiance dans le gouvernement, puisque c'est surtout par les services que les citoyens entrent en contact avec leur gouvernement, personnellement et directement. En parallèle, Service Canada cherchera à implanter et à récompenser une culture de l'excellence du service. Voici ce qu'il fera :

- Cultiver l'excellence du service en créant une carrière axée sur la prestation de services au gouvernement, d'où la possibilité pour les employés de Service Canada d'obtenir de l'avancement par l'innovation en matière de services axés sur le citoyen.
- Parvenir à l'excellence du service par le lancement en première étape du centre de formation de Service Canada, soit le centre Galleria à Regina, ce qui sera le point de départ de nouveaux investissements dans l'enrichissement des compétences et des capacités des employés dans les services à la population canadienne.
- Récompenser l'excellence du service en établissant un programme de développement du leadership, en améliorant les capacités dans ce domaine et en lançant le Bureau de l'innovation des employés.

Enfin, Service Canada a pris des engagements envers les Canadiens et les parlementaires. Fidèle à sa priorité d'accroissement de la responsabilité et de la transparence, il déclarera ses progrès par la Charte des services, les normes de service et le bulletin de rendement, ainsi que par la création du Bureau de la satisfaction des clients.

Le gouvernement fédéral a récemment traversé une période de profondes transitions et de vastes changements. Il se doit de surmonter toute une gamme de problèmes et d'exploiter diverses possibilités pour améliorer ses résultats, rendre des comptes et être transparent, et pour se préparer à répondre aux exigences de l'avenir. La responsabilité et la transparence tiennent une grande place dans une bonne régulation publique. Ce sont aussi d'importants facteurs de rétablissement, voire d'amélioration de la confiance des citoyens dans la capacité du gouvernement à répondre à leurs besoins. La création de Service Canada est un grand pas en avant dans un mouvement de transformation du gouvernement. Elle vient fondamentalement changer la culture dans une prestation de services qui devient plus axée sur les résultats et les citoyens et repose davantage sur la collaboration. Dans son souci de l'excellence des services, cet organisme ne se contente pas de se doter d'une nouvelle structure de fourniture de services. Il se soucie aussi d'améliorer les services concrètement et visiblement de manière à démontrer ce que sont des services transparents axés sur le citoyen et à faire naître une culture de responsabilité et de transparence. Le résultat en sera une plus grande satisfaction de la population à l'égard des programmes et des services de l'État.

Pour démontrer cette volonté de transparence et d'adaptation de la part du gouvernement, une Charte des services a été rendue publique; elle expose ce que les Canadiens peuvent attendre et la façon pour eux de dire ce qu'ils pensent. Service Canada contrôlera et déclarera constamment les progrès accomplis par rapport à cette charte. Un organe indépendant, le Bureau de la satisfaction des clients, a été chargé de recueillir les opinions des Canadiens sur la qualité des services et de recommander des améliorations. Cet autonome, Service Canada rendra publiques des normes de service où sera clairement précisé le niveau de service qu'il s'engage à assurer selon les objectifs de la Charte des services. Pour faire la preuve que le gouvernement rend des comptes et est transparent, il déclarera ses succès dans l'application des normes de service par un bulletin de rendement qui figurera dans le rapport annuel de Service Canada au Parlement et aux Canadiens. Dans le sens même de cette transparence et de cette responsabilisation supérieures en matière de service, il s'est doté de systèmes de contrôle qui renforcent les pratiques dites de gérance et les structures de gestion et de reddition de comptes dans toute son organisation.

En 2006-2007, il s'emploiera à améliorer les services aux Canadiens, à accroître la transparence et la reddition de comptes et à reconnaître et récompenser l'excellence des services. De cette orientation témoignent directement les activités de programmes Services transparents axés sur le citoyen, Intégrité et Gouvernement qui favorise la collaboration et le réseautage.

ACTIVITÉ DE PROGRAMMES : SERVICES TRANSPARENTS AXÉS SUR LE CITOYEN

Par le passé, les Canadiens devaient découvrir par eux-mêmes comment obtenir les services dont ils avaient besoin dans une multitude de points distincts d'exécution des programmes et de prestation des services ministériels. En axant le service sur le citoyen, on change la façon dont l'État sert la population, on remet le citoyen au centre même des modes d'activité et on assure une qualité de service conforme aux besoins et aux attentes des gens. Dans des services axés sur le citoyen, ceux-ci sont regroupés, intégrés, très accessibles et personnalisés; ils sont fournis au téléphone, par Internet, au comptoir et par la poste. À la fin, ce sont les résultats stratégiques qui s'améliorent pour les Canadiens.

C'est ainsi que, avec cette nouvelle orientation « citoyen », les ministères et les programmes ne pourront plus agir seuls, le gouvernement fédéral ne cherchera plus à réduire sa présence mais au contraire à élargir ses points de service dans les régions et qu'il ne cherchera plus principalement à offrir des prestations mais plutôt à représenter le gouvernement du Canada auprès des citoyens Canadiens.

Résultat stratégique

AMÉLIORER LES RÉSULTATS DES CANADIENS GRÂCE À L'EXCELLENCE DU SERVICE

SERVICE CANADA

Le service importe aux Canadiens. Dans leurs rapports avec le gouvernement du Canada, les citoyens s'attendent à juste titre à être servis avec rapidité, équité, savoir-faire, compétence, courtoisie, et à obtenir des résultats. Dans le cadre de fonctionnement complexe qui est le sien, le gouvernement fédéral entend assurer le plus haut niveau de service de qualité axé sur les citoyens de manière à répondre aux besoins des Canadiens, voire à dépasser leurs attentes.

Fruit des efforts du gouvernement en ce sens, Service Canada a officiellement vu le jour le 14 septembre 2005. Il a inauguré un nouveau mode de prestation de services aux Canadiens. Étant un organisme spécial de services, il place les gens au cœur même de son mandat, facilitant aux Canadiens la tâche d'obtenir les services dont ils ont besoin en un même lieu. En mettant plus l'accent sur les programmes et les services, il contribuera à améliorer les résultats stratégiques, et ce, en veillant à ce que les citoyens et les collectivités soient plus en prise sur les services et les prestations dont ils ont besoin. Service Canada s'inscrit dans un mouvement de transformation culturelle de la fonction publique, le citoyen devenant le centre des activités et le service acquérant toute son importance. L'organisme améliorera les services à l'échelle des modes de prestation, gagnera en souplesse et en capacité pour l'introduction de programmes et de services nouveaux et veillera à ce que les investissements en infrastructure de prestation de services soient mieux coordonnés et rationalisés.

Service Canada a pour mandat d'assurer en toute intégration et de concert avec les ministères fédéraux et les autres gouvernements une gamme complète de programmes et de services aux Canadiens, autre facteur de rationalisation de la prestation des services de l'État. Il permet l'expérience de services regroupés, accessibles et personnalisés par des modes de prestation multiples, dont le téléphone, Internet, le comptoir et la poste. Il s'appuie sur plus de 20 000 employés soucieux de se mettre au service des Canadiens. On y trouve 433 points de prestation de services disséminés sur le territoire canadien, le service national 1 800 O-Canada, une gamme de services en ligne par Internet (servicecanada.gc.ca) et des services d'extension.

Faits en bref – Chaque année, Service Canada :

- sert plus de 32 millions de Canadiens;
- verse pour plus de 70 milliards de dollars (180 millions par jour) de prestations aux Canadiens;
- effectue 350 millions d'opérations avec les citoyens;
- s'occupe de plus de 55 millions d'appels;
- poste plus de 20 millions de lettres;
- s'occupe de plus de 4,8 millions d'opérations en ligne;
- entre en interaction avec plus de 55 000 organismes communautaires.

FORUM URBAIN MONDIAL

Le Canada a offert aux Nations Unies d'accueillir le troisième Forum urbain mondial (FUM) à Vancouver du 19 au 23 juin 2006. Cet événement organisé par ONU-Habitat en collaboration avec le pays hôte est présenté tous les deux ans. Il a pour objectif de favoriser la discussion et de trouver des solutions aux défis posés par l'urbanisation rapide dans le monde d'aujourd'hui. Le FUM réunit une grande diversité de participants (gouvernements, administrations locales, organisations non gouvernementales, entreprises du secteur privé, organismes communautaires, spécialistes, etc.).

Le Ministère s'est vu confier la responsabilité d'organiser l'événement et d'y coordonner la présence canadienne. Pour ce faire, il a collaboré avec d'autres ministères et organismes fédéraux, d'autres paliers de gouvernement et d'autres intervenants. Une facette importante des responsabilités du Ministère consistait à travailler en étroite collaboration avec ONU-Habitat pour veiller à ce que tout se passe bien.

Depenses prévues – FUM 3

Le gouvernement du Canada a affecté 27,6 millions de dollars sur deux ans (2005-2006 et 2006-2007) à l'organisation et à la gestion de cette conférence, dont 15 millions (11 en 2006-2007) sont de l'argent frais en provenance de RHDSC. Le reste des fonds est tiré des budgets en place de divers ministères et organismes fédéraux.

Résultats

Plus de 10 000 personnes ont assisté au Forum urbain mondial à Vancouver; on en attendait 6 000. Elles sont venues de 160 pays. Il y a notamment eu 63 délégations dirigées par des ministres. Plus de 400 maires ont été présents. Le premier ministre Harper a présenté le discours-programme à l'ouverture. Les médias ont beaucoup parlé de l'événement, tant au Canada qu'ailleurs dans le monde. Les commentaires des participants, les premiers résultats d'évaluation et la propre analyse de ONU-Habitat indiquent tous que la rencontre est une réussite considérable tant pour la logistique et le programme que pour la réalisation des objectifs fixés. Il y a succès en particulier pour les aspects suivants : volonté des Nations Unies d'assurer une participation nombreuse et productive, de bien mettre le FUM sur les rails et d'insister sur les idées pratiques; volonté du Canada de mettre ses pratiques de gestion urbaine en évidence et de susciter chez les participants des réactions favorables au Forum; volonté du gouvernement fédéral de voir ces objectifs se réaliser et d'assurer une communication efficace, précise et harmonisée des apports gouvernementaux à la gestion des dossiers urbains (villes et collectivités).

Partenaires clés

Il y a eu deux grands partenaires, à savoir ONU-Habitat et la Globe Foundation. Le premier est un organisme onusien ayant son siège à Nairobi et chargé d'organiser le FUM tous les deux ans, de travailler avec le pays hôte et de mobiliser des fonds à l'échelle internationale, plus particulièrement dans le pays d'accueil, pour la rencontre. Le second est un organisme sans but lucratif qui s'est engagé, par un accord de contributions conclu avec le gouvernement du Canada, à gérer les aspects logistiques du FUM, dont l'intendance d'une activité expérimentale et préparatoire en ligne, HabitatJam, qui a mis à contribution près de 35 000 personnes de toutes les régions du globe trois jours durant en décembre 2005.

Ressources financières détaillées par programmes ou service

Ressources financières (en millions de dollars)			
2006-2007	2007-2008	2008-2009	
133,0	2,2	2,2	Initiative de partenariats en action communautaire
18,2	-	-	Autochtones sans abri en milieu urbain
5,4	-	-	Fonds régional d'aide aux sans-abri
2,8	-	-	Programme national de recherche
2,1	-	-	Système d'information sur les personnes et les familles sans abri
2,5	-	-	Initiative visant à mettre des biens immobiliers excédentaires fédéraux à la disposition des sans-abri
13,1	1,1	1,1	Répartition des services ministériels ^a
11,0	-	-	Autres ^b
188,1	3,3	3,3	Total ^c
Ressources humaines			
383	12	12	Équivalents temps plein ^a

^a La portion des services ministériels liés au bureau du Ministre, au bureau du Sous-Ministre, au bureau du Contrôleur et des Services partagés a été divisée entre chaque résultat stratégique. Pour 2006-2007, 101 ÉTP sont inclus dans le 383 ÉTP.

^b Ce montant inclut 11,0 millions de dollars pour le Forum urbain mondial - Vancouver 2006.

^c Ce montant inclut 22,8 millions de dollars (291 ÉTP) en 2006-2007, 1,5 millions de dollars (7 ÉTP) en 2007-2008, et 1,5 millions de dollars (7 ÉTP) en 2008-2009, pour l'exécution des programmes et des services par Service Canada. Pour de plus amples renseignements au sujet des opérations de Service Canada, s'il-vous plaît voir le résultat stratégique suivant "Améliorer les résultats des Canadiens grâce à l'excellence du service".

Modifications de l'Architecture des activités de programmes 2005-2006 pour l'activité de programmes Logement et sans-abri. On ne relève aucun autre changement au niveau des sous-activités que le changement de nom par lequel l'activité de programmes Aide aux sans-abri devient Logement et sans-abri.

Programme national de recherche (PNR) : Ce programme s'occupe des lacunes et des priorités d'acquisition de connaissances sur les questions d'itinérance au Canada. Il vise à élargir les bases des politiques et des recherches d'intérêt pour les collectivités, à encourager et soutenir les partenariats de recherche (avec les organismes de recherche, les organismes communautaires, les autres ministères fédéraux et les milieux universitaires) et à faciliter la mise en commun des meilleures pratiques et les transferts de connaissances. En procurant des fonds aux partenaires pour qu'ils soient plus capables de comprendre en profondeur le phénomène de l'itinérance, le PNR favorise l'élaboration et l'évaluation de solutions appropriées et efficaces aux problèmes locaux et nationaux de sans-abri, ce qui est essentiel si on entend utiliser des ressources rares avec efficacité et appuyer les efforts des collectivités à long terme. http://www.homelessness.gc.ca/initiative/nrp_f.asp

Fonds régional destiné aux sans-abri (FRDS) : Le FRDS soutient les collectivités des petites localités et les collectivités rurales qui se heurtent à des problèmes locaux d'itinérance, mais sont souvent incapables de les régler. Les sans-abri ou les gens exposés à l'itinérance doivent souvent se rendre dans les grands centres urbains pour obtenir le soutien et les services d'aide qui leur sont destinés, ce qui peut grever les systèmes de services des localités. Le FRDS procure des fonds pour la mise en place des services de soutien qu'exige la prévention de l'itinérance et qui aident à stabiliser les conditions de vie des personnes et des familles à risque. Il favorise en outre une grande diversité de partenariats et tient compte des besoins uniques des jeunes populations dans la démarche de planification et de mise en œuvre. http://www.homelessness.gc.ca/initiative/rhf_f.asp

Initiative visant à mettre des biens immobiliers excédentaires fédéraux à la disposition des sans-abri : Cette initiative met des biens fédéraux excédentaires à la disposition des collectivités de tout le pays pour qu'elles puissent répondre à leurs besoins locaux en ce qui concerne les sans-abri. Le programme est coordonné par la Direction générale du logement et des sans-abri (DGLSA). Les projets de lutte à l'itinérance, qui doivent être financièrement viables et durables, aident les collectivités à prendre en charge les importantes dépenses d'immobilisations en terrains et bâtiments. Les ministères et organismes publics que l'on encourage à faire l'inventaire des biens immobiliers utiles sont indemnisés à la valeur marchande; ils transfèrent les biens à des organismes communautaires, au secteur sans but lucratif et aux autres paliers de gouvernement – moyennant une somme symbolique – pour la réduction et la prévention de l'itinérance. On peut obtenir un financement complémentaire applicable aux frais de construction et de rénovation grâce à des programmes fédéraux approuvés comme l'IPAC et les programmes de la Société canadienne d'hypothèques et de logement (SCHL). Trois organismes fédéraux, à savoir Travaux publics et Services gouvernementaux Canada, Ressources humaines et Développement social Canada (par l'intermédiaire de la DGLSA) et la SCHL, sont les partenaires qui, au double niveau national et régional, réalisent et gèrent cette initiative. http://www.homelessness.gc.ca/initiative/sfrphi_f.asp

LOGEMENT ET SANS-ABRI : RESSOURCES FINANCIÈRES ET HUMAINES – DÉPENSES PRÉVUES

Ressources financières et humaines			
Dépenses prévues			
	2006-2007	2007-2008	2008-2009
Ressources financières (en millions de \$)			
Dépenses de fonctionnement brutes	40,2	3,3	3,3
Subventions et contributions non législatives	147,9	-	-
Total	188,1	3,3	3,3
Ressources humaines			
Équivalents temps plein	383	12	12

LOGEMENT ET SANS-ABRI : PROGRAMMES CONTRIBUANT À LA RÉALISATION DES PRIORITÉS

L'activité de programmes Logement et sans-abri aide les collectivités, dans le cadre de partenariats, à prendre des mesures – refuges, logements de soutien ou de transition, services de soutien – grâce auxquelles les personnes et les familles sans abri et les gens exposés à l'itinérance pourront mieux parvenir à l'autonomie, d'où la possibilité pour eux d'apporter une contribution à la société et à l'économie. http://www.homelessness.gc.ca/home/index_f.asp

Initiative de partenariats en action communautaire (IPAC) : L'IPAC rend plus disponibles et accessibles une diversité de services et d'installations (refuges, logements de soutien ou de transition et mesures de prévention) le long du continuum qui va de l'itinérance à l'autonomie et à l'indépendance. Les projets financés grâce à cette initiative vont aux domaines prioritaires délimités par une démarche de planification dite des collectivités inclusives. Outre l'aide financière aux collectivités, le programme les encourage à travailler de concert avec les autorités provinciales-territoriales et municipales et les secteurs privé et bénévole pour accroître les moyens et intervenir globalement contre le phénomène de l'itinérance. Les collectivités reçoivent un financement maximal dont elles doivent trouver la contrepartie auprès d'autres sources de financement dans le milieu (campagnes de financement, parraînages locaux, etc.). Elles doivent aussi expliquer en quoi leurs activités seront durables (c.-à-d. comment elles se maintiendront une fois que le financement de l'IPAC aura pris fin). http://www.homelessness.gc.ca/initiative/scpi_f.asp

Autochtones sans abri en milieu urbain (ASAMU) : L'itinérance chez les Autochtones pose un sérieux problème dans un certain nombre de localités, et on peut s'y attaquer au mieux en trouvant des solutions locales. L'INSA continuera à répondre aux besoins particuliers de la population autochtone par ce volet d'intervention ASAMU. Celui-ci confère la souplesse voulue pour répondre aux besoins des Autochtones hors réserve qui sont sans abri, et ce, par des services culturellement adaptés. L'un des principaux objectifs est l'acquisition de capacités – à l'interieur comme à l'extérieur des collectivités autochtones – par la prise de décisions et la planification au niveau communautaire et par la formation de partenariats. Les collectivités n'ont pas à trouver la contrepartie du financement accordé, mais on encourage les apports communautaires dans la mesure du possible. La Direction générale du logement et des sans-abri veille avec le Bureau de l'interlocuteur fédéral du ministère des Affaires indiennes et du Nord Canada à la complémentarité des projets pilotes de la Stratégie pour les Autochtones vivant en milieu urbain et du volet ASAMU de l'INSA. http://www.homelessness.gc.ca/initiative/uanh_f.asp

Système d'information sur les personnes et les familles sans abri (SISA) : Il n'y a guère de renseignements sérieux ni de méthodes sûres permettant d'établir en toute précision le nombre de sans-abri au Canada, l'étendue des moyens de soutien et des services aux itinérants dans les refuges et la diversité de la clientèle de ces établissements. Pour mieux combler ces lacunes de nos connaissances, le SISA met à la disposition des fournisseurs de services un système de gestion électronique des données leur permettant de partager l'information et de former des partenariats aux niveaux local, privé, municipal, provincial-territorial et fédéral. Il facilite les activités à plus long terme de planification et d'acquisition de capacités par les collectivités en fonction de leurs problèmes locaux d'itinérance. Grâce aux retombées d'un réseau de collectivités qui échangent de l'information, on pourra mieux mettre en place une base de données nationale, laquelle fera mieux comprendre l'importance et l'étendue de la population de sans-abri en refuge, orientera l'élaboration de politiques et aidera à mieux transformer encore les pratiques de gestion dans le réseau de refuges. http://www.homelessness.gc.ca/initiative/hifts_f.asp

Amélioration de la sécurité du revenu, accès aux possibilités et mieux être des personnes, des familles et des collectivités

ACTIVITÉ DE PROGRAMMES : LOGEMENT ET SANS-ABRI

- Contribuer à la réduction de l'itinérance au Canada.
- Élaborer des politiques de logement et d'itinérance pour les Canadiens, y compris pour les autochtones.
- Renforcer les liens horizontaux entre le logement, l'itinérance et d'autres secteurs stratégiques.

Résultat
stratégique

Priorités
2006-2007

Résultats
prévus de
l'activité de
programmes

- Contribution à la réduction de l'itinérance.

Indicateurs
de
programme

- Pourcentage des investissements alliant au continuum des mesures de soutien et des services en fonction des priorités arrêtées par la collectivité.
- Rapport entre l'ensemble des investissements dans le cadre de l'initiative nationale pour les sans-abri, d'une part, et le financement par type de partenariats dans chaque province ou territoire en 2003-2007, d'autre part.
- Augmentation des sources accessibles d'information ou de données sur l'itinérance.

Programmes

- Initiative de partenariats en action communautaire
- Autochtones sans abri en milieu urbain
- Fonds régional destiné aux sans-abri
- Programme national de recherche
- Système d'information sur les personnes et les familles sans abri
- Initiative visant à mettre des biens immobiliers excédentaires fédéraux à la disposition des sans-abri

Ressources

DÉPENSES PRÉVUES : 188,1 M\$

ETP : 383

L'habitation, ce qui les expose hautement à l'itinérance. La population canadienne des sans-abri est diverse : victimes de troubles mentaux et/ou de toxicomanie, familles monoparentales à chef féminin, jeunes, victimes de violence familiale, réfugiés, immigrants récents, ex-délinquants, travailleurs pauvres, Autochtones, etc. Dans tout le pays, plus particulièrement dans les grands centres urbains, les Autochtones sont nettement surreprésentés dans la population des sans-abri.

L'INSA fait des efforts concertés en vue d'instaurer une meilleure collaboration horizontale (c.-à-d. avec les autres ministères fédéraux) pour l'obtention de résultats communs, sachant que la clé dans ce domaine est le choix des instruments de responsabilisation et d'exécution. Dans le secteur de la santé, elle collabore avec les Instituts de recherche en santé du Canada (IRSC) au financement de divers projets et est largement associée à l'initiative « Réduire les disparités sur le plan de la santé » des IRSC. La Direction générale du logement et des sans-abri (DGLSA) s'est liée par un protocole d'entente (PE) à la Direction générale des projets stratégiques de l'Agence de santé publique du Canada pour le financement commun du programme de formation pédagogique portant sur le syndrome d'alcoolisme fœtal.

La Société canadienne d'hypothèques et de logement (SCHL) fait maintenant partie du portefeuille de RHDSC, d'où une plus grande complémentarité des programmes relevant de l'INSA, de l'initiative en matière de logement abordable et du Programme d'aide à la remise en état des logements et d'où aussi une plus grande capacité d'exécution de travaux communs. La DGLSA est en voie de reconstruire son PE avec la SCHL pour les questions de recherche générale et de partage et d'intégration des données. Comme autre initiative en collaboration, mentionnons l'initiative de revitalisation des quartiers dirigée par la DGLSA. Des PE ont été signés avec d'autres ministères et organismes fédéraux : Santé Canada, Sécurité publique et Protection civile Canada, autres directions de RHDSC, etc.

LOGEMENT ET SANS-ABRI : PRIORITÉS ET PLANS

Priorité : Contribuer à la lutte livrée à l'itinérance au Canada.	
Plans :	<ul style="list-style-type: none"> Revoir et diffuser les cadres, les directives et les outils de financement de programmes afin de ménager des transitions sans heurt et une mise en œuvre efficiente pour l'initiative nationale pour les sans-abri pendant l'année de prolongation 2006-2007. Produire et diffuser les résultats de l'initiative nationale pour les sans-abri pour la période 2003-2007.
Priorité : Élaborer des politiques de logement et d'itinérance pour les Canadiens, y compris pour les Autochtones.	
Plans :	<ul style="list-style-type: none"> Concevoir des options de politique publique pour l'Initiative nationale pour les sans-abri au-delà de mars 2007.
Priorité : Renforcer les liens horizontaux entre le logement, l'itinérance et d'autres secteurs stratégiques.	
Plans :	<ul style="list-style-type: none"> Améliorer la coordination et accroître la transparence des liens horizontaux avec les partenaires fédéraux.

- Entente sur le développement de la petite enfance n'est plus une sous-sous-activité mais une sous-activité.
- Prestation nationale pour enfants n'est plus une sous-sous-activité mais une sous-activité.
- Les sous-sous-activités RPC – Prestations d'invalidité aux bénéficiaires ayant des enfants, RPC – Orphelins et RPC – Survivants ont été subordonnées à la sous-sous-activité Régime de pensions du Canada – Prestations d'invalidité.

ACTIVITÉ DE PROGRAMMES : LOGEMENT ET SANS-ABRI

En décembre 1999, le gouvernement fédéral a lancé l'Initiative nationale pour les sans-abri (INSA) sur trois ans²⁴ en vue de s'attaquer à une crise nationale grandissante de l'itinérance dans les rues du pays. En 2003, on a reconduit l'INSA pour trois autres années afin de procurer aux collectivités les outils nécessaires pour concevoir et appliquer des stratégies locales de lutte à l'itinérance. En novembre 2005, le gouvernement a annoncé une prolongation d'un an (2006-2007) de cette initiative dotée de 134,8 millions, le but étant de soutenir dans leur rôle essentiel les collectivités ayant besoin d'investir dans l'habitation et l'aide aux sans-abri. Grâce à cette prolongation, on maintient des refuges essentiels avec les services de soutien liés pour les sans-abri des localités urbaines et rurales de tout le pays.

L'INSA fait des investissements stratégiques dans 61 collectivités désignées, ainsi que dans les petites localités et les collectivités rurales et autochtones du territoire canadien en vue d'établir un éventail de mesures de soutien et de services devant aider les sans-abri et les membres à risque de ces collectivités à devenir plus autonomes. La Direction générale du logement et des sans-abri (auparavant Secréariat national pour les sans-abri) et les collectivités collaborent à l'élargissement et à l'accroissement des partenariats; on vise avant tout le secteur de l'entreprise, les syndicats et les fondations pour que les efforts communautaires à long terme demeurent viables. Le fruit de tout ce travail a été une plus grande capacité des collectivités à planifier, à prendre des décisions, à former des réseaux et à échanger de l'information, ce qui permet de trouver des solutions locales aux problèmes d'itinérance.

L'INSA poursuit son travail pour remédier à une situation nationale où au moins 150 000 Canadiens utilisent chaque année des refuges pour sans-abri. D'innombrables autres personnes vivent dans la rue ou comptent parmi les « sans-abri cachés », c'est-à-dire les gens qui habitent chez des proches, dorment dans des automobiles, loin des regards du public et hors du réseau

de refuges. Ajoutons que plus d'un million de Canadiens consacrent plus de la moitié de leur revenu à

Indicateurs de résultats stratégiques	
INDICATEURS	NIVEAU ACTUEL
Répartition de tous les fonds de l'IPAC affectés aux projets réalisés en 2005-2006 entre : a) refuges; b) logements de transition ou de soutien.	35 % 65 %
Nombre de partenaires en financement de l'Initiative nationale pour les sans-abri.	385*
Pourcentage par secteur en 2005-2006 des partenaires de financement de l'Initiative nationale pour les sans-abri.	
Secteur sans but lucratif	34 %
Parainage/organisation/destinataire (financement interne)-20 %	
Ensemble des paliers de gouvernement (organismes fédéraux, provinciaux-territoriaux, régionaux-municipaux, etc.)	24 %
Secteur privé	10 %
Autres (communautés religieuses, syndicats, etc.)	12 %
* Par le passé, on a présenté des totaux en valeur cumulative.	

²⁴ L'Initiative nationale pour les sans-abri est une importante initiative horizontale qui, dirigée par RHDSC, met à contribution divers partenaires, dont des organismes appartenant aux autres paliers de gouvernement. On peut mieux se renseigner sur cette initiative à l'adresse http://www.lbs-sct.gc.ca/rma/epi-bdtrp/hrdb-rhbd/profil_e.asp.

Ressources financières détaillées par programmes ou service

2006-2007	2007-2008	2008-2009
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Ressources financières (en millions de dollars)

Investissement social			
Aînés et pensions	53 248,3	55 779,3	58 514,7
Programmes de prestations d'invalidité	274,0	269,0	268,9
Régime de pension du Canada - Prestations d'invalidité	3 523,3	3 674,0	3 829,0
Développement communautaire et partenariats	52,6	59,5	62,4
Répartition des services ministériels ^a	43,2	40,4	40,7
Total partiel	57 141,4	59 822,2	62 715,7

Enfants et familles			
Soins aux enfants	1 610,0	2 085,0	2 065,0
Cadre multilatéral pour l'apprentissage et la garde des jeunes enfants	650,0	250,0	250,0
Ententes sur le développement de la petite enfance	3,5	3,5	3,5
Prestation nationale pour enfants	2,4	2,4	2,4
Répartition des services ministériels ^a	5,4	5,7	5,8
Autres	11,5	11,5	11,5
Total partiel	2 282,8	2 358,1	2 338,2

Ressources humaines

Total	59 424,2	62 180,3	65 053,9
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^a La portion des services ministériels liés au bureau du Ministre, au bureau du Sous-Ministre, au bureau du Contrôleur et des Services partagés a été divisée entre chaque résultat stratégique.

Activité de programmes Investissement social – Modifications de l'Architecture des activités de programmes 2005-2006 :

- L'ancienne activité de programmes Investissements sociaux a été divisée en deux activités de programmes dans la nouvelle AAP, à savoir Investissement social et Enfants et Familles.
- L'ancienne sous-activité Aînés est devenue Aînés et Pensions.
- L'ancienne sous-activité Personnes handicapées est devenue Programmes de prestations d'invalidité.
- RPC – Prestations d'invalidité est devenu une sous-activité qui comprend Prestations et appels – invalidité.
- La sous-activité Subventions et contributions communautaires est devenue Développement communautaire et partenariats.
- L'ancienne sous-activité Appels est désormais subordonnée à Régime de pensions du Canada – Programme de prestations d'invalidité.

Activité de programmes Enfants et familles – Modifications de l'Architecture des activités de programmes 2005-2006 :

- On a ajouté une nouvelle sous-activité appelée Garde des enfants avec deux grandes priorités gouvernementales, à savoir la Prestation universelle pour la garde d'enfants et l'Initiative sur les places en garderie.
- Cadre multilatéral pour l'apprentissage et la garde des jeunes enfants n'est plus une sous-sous-activité mais une sous-activité.

INVESTISSEMENT SOCIAL, ET ENFANTS ET FAMILLES : RESSOURCES HUMAINES ET FINANCIÈRES – DÉPENSES PRÉVUES²³

Ressources financières et humaines			
Dépenses prévues			
Ressources financières (en millions de \$)			
	2006-2007	2007-2008	2008-2009
Dépenses de fonctionnement brutes	160,3	150,1	149,7
Subventions et contributions non législatives	296,6	303,3	306,5
Pailements de transfert législatifs:			
Sécurité de la vieillesse	23 255,0	24 139,0	25 285,0
Supplément de revenu garanti	6 820,0	7 219,0	7 512,0
Versements d'allocations	500,0	537,0	568,0
Prestation universelle pour la garde d'enfants	1 610,0	2 085,0	2 065,0
Garde d'enfants - paiements aux provinces & territoires	650,0	-	-
Nouvelles places en garderie	-	250,0	250,0
Total Paiements de transfert législatifs:	32 835,0	34 230,0	35 680,0
Total partiel	33 291,9	34 683,4	36 136,2
Prestations du RPC	26 132,3	27 496,9	28 917,7
Total	59 424,2	62 180,3	65 053,9
Ressources humaines			
Equivalents temps plein	872	884	884

²³ Les tableaux des dépenses prévues sont présentés ensemble pour Investissement social et Enfants et Familles conformément au budget principal des dépenses 2006-2007.

Entente sur le développement de la petite enfance : En septembre 2000, le gouvernement canadien et les gouvernements provinciaux-territoriaux ont conclu l'Entente fédérale, provinciale et territoriale sur le développement de la petite enfance (DPE) en vue d'améliorer et d'élargir les services et les programmes destinés aux enfants de moins de six ans et à leur famille²⁰. Le but général de cette initiative est d'améliorer et d'élargir les services de soutien aux jeunes enfants (du stade prénatal à l'âge de six ans) et à leurs parents en développement de la petite enfance. Voici les objectifs particuliers qui ont été énoncés :

- promouvoir le développement de la petite enfance pour que, dans toute la mesure de leurs possibilités, les enfants soient en santé et en sécurité physiques et affectives, prêts à apprendre et socialement engagés et responsables;
- aider les enfants à s'épanouir et les familles à appuyer leurs enfants dans des collectivités fortes.

Afin d'atteindre ces objectifs, le gouvernement du Canada transfère chaque année 500 millions par le Régime TSC (Transfert social canadien) aux gouvernements provinciaux et territoriaux pour l'amélioration et l'élargissement des programmes et des services dans quatre grands domaines : promotion de la santé de la grossesse, de la naissance et de la petite enfance; amélioration des services de soutien à l'activité parentale et à la vie familiale; renforcement du développement, de l'apprentissage et de la garde des jeunes enfants; renforcement des services de soutien à la vie communautaire. Pour le contrôle des dépenses et tous les deux ans de l'évolution d'une série commune d'indicateurs du bien-être de la petite enfance. On peut mieux se renseigner sur cette initiative à l'adresse <http://www.ecd-elcc.ca>.

Prestation nationale pour enfants : Instituée en 1998 comme complètement à la Prestation fiscale canadienne pour enfants²¹, la Prestation nationale pour enfants représente un important engagement en vue d'aider les enfants de familles à faible revenu à réaliser pleinement leur potentiel. Ce régime est un partenariat fédéral-provincial-territorial²² (avec un volet « Premières nations ») qui destine des mesures de soutien du revenu, des prestations et des services aux familles à faible revenu ayant des enfants. Il aide à prévenir et à réduire la pauvreté chez les enfants, favorise l'intégration au marché du travail en veillant à ce que les familles aient toujours intérêt à travailler et atténue les chevauchements et le double emploi en harmonisant les objectifs et les prestations et en simplifiant l'administration du régime. Grâce à cette initiative, le gouvernement canadien apporte un soutien pécuniaire aux familles à faible revenu ayant des enfants par le Supplément de la prestation nationale (SPNE). Ressources humaines et Développement social Canada se charge de l'élaboration des politiques relatives à la Prestation nationale pour enfants et son ministre représente le gouvernement canadien dans cette initiative fédérale-provinciale-territoriale. L'application du régime PNE et son degré d'efficacité dans la réalisation des objectifs fixés font l'objet d'un suivi par la production de rapports d'étape annuels et de coévaluations fédérales-provinciales-territoriales. Ces documents peuvent être consultés au site Web de la Prestation nationale pour enfants à l'adresse http://www.nationalchildbenefit.ca/home_f.html

²⁰ Le gouvernement québécois fait siens les principes généraux de l'Entente sur le développement de la petite enfance, mais il n'a pas participé à l'élaboration de cette initiative, étant soucieux de préserver sa compétence exclusive en matière sociale. Il reçoit toutefois sa part de fonds fédéraux et investit abondamment dans des programmes et des services à l'enfance et à la famille.

²¹ Le régime de la Prestation fiscale nationale pour enfants est administré par l'Agence du revenu du Canada; cet organisme rend compte de ses priorités, de ses indicateurs et de ses résultats stratégiques.

²² Le gouvernement québécois a dit faire siens les principes fondamentaux du régime de la Prestation nationale pour enfants. Il a choisi de ne pas participer à cette initiative, étant soucieux de rester maître de tout ce qui est soutien du revenu pour les enfants du Québec. Il a toutefois adopté un régime semblable au régime fédéral. Dans toute cette section, les mentions de la situation fédérale-provinciale-territoriale se trouvent à exclure le Québec.

ENFANTS ET FAMILLES : PROGRAMMES CONTRIBUANT À LA RÉALISATION DES PRIORITÉS

L'activité de programmes Enfants et familles contribue aux efforts afin que tous les enfants aient le meilleur départ possible dans la vie et afin que les familles bénéficient de mesures de soutien et d'une gamme de choix.

Plan universel pour la garde d'enfants du Canada :

Le gouvernement du Canada a adopté le Plan universel pour la garde d'enfants du Canada avec deux grands volets conçus pour donner aux parents le choix de leur service de garde afin qu'ils puissent concilier vie professionnelle et vie familiale.

Prestation universelle pour la garde d'enfants : Le 1^{er} juillet 2006, toutes les familles deviennent admissibles à une somme annuelle de 1 200 \$ pour chaque enfant de moins de six ans. Cette prestation est imposable chez le conjoint au revenu inférieur. Les paiements se font directement aux parents pour qu'ils puissent choisir les services de garde qui conviennent le mieux à leurs enfants et aux besoins de la famille. Cette prestation universelle s'ajoute aux prestations fédérales comme la Prestation fiscale canadienne et le Supplément de la prestation nationale pour enfants et la déduction pour frais de garde d'enfants. Elle n'a pas d'effet sur les prestations que reçoivent les familles dans le cadre de ces programmes. On peut se renseigner à ce sujet à l'adresse <http://www.gardeenfants.ca>

Initiative sur les places en garderie : Dans le budget fédéral du 2 mai 2006, le gouvernement du Canada s'engage à investir 250 millions de dollars par an à compter de 2007-2008 pour subventionner la création de places en garderie en collaboration avec les provinces et les territoires, les employeurs et les organismes communautaires sans but lucratif, en vue d'ajouter jusqu'à 25 000 places par année pour les familles au travail. Ce programme répond à une diversité de besoins, comme le travail par poste ou saisonnier, et la vie familiale en milieu rural. La mise au point de cette initiative se poursuivra tout au long de 2006 notamment par des consultations.

Cadre multilatéral pour l'apprentissage et la garde des jeunes enfants : En s'appuyant sur leur accord de septembre 2000 sur le développement de la petite enfance, les ministres fédéraux-provinciaux-territoriaux responsables des services sociaux¹⁹ se sont entendus en mars 2003 sur un cadre propre à rendre plus accessibles des programmes et des services abordables et de qualité sous réglementation provinciale-territoriale pour l'apprentissage et la garde des jeunes enfants. Ce cadre vise plus précisément à mieux promouvoir le développement de la petite enfance et la participation des parents à l'emploi ou à la formation par un meilleur accès à des programmes et à des services abordables et de qualité.

Pour atteindre ces objectifs, le gouvernement canadien contribue 1,05 milliard sur cinq ans par le régime TSC (Transfert social canadien) aux investissements des gouvernements provinciaux et territoriaux dans l'apprentissage et la garde des jeunes enfants. Les programmes et les services financés par cette initiative assureront surtout ces services aux enfants dans les garderies institutionnelles et familiales, les établissements préscolaires, les jardins d'enfants, etc. On prévoit notamment des fonds d'investissement et de fonctionnement, des subventions aux places de garde, des sursalaires, des services de formation, de perfectionnement professionnel et de soutien, l'assurance de la qualité et des activités d'information et d'orientation des parents. Les gouvernements rendent compte annuellement de leurs activités et de leurs dépenses en application de l'Entente sur le développement de la petite enfance. On peut se renseigner à ce sujet à l'adresse <http://www.eecd-elcc.ca>.

¹⁹ Le gouvernement québécois fait siens les principes généraux de l'Initiative de l'apprentissage et de la garde des jeunes enfants, mais il n'a pas participé à l'élaboration de cette initiative, étant soucieux de préserver sa compétence exclusive en matière sociale. Il reçoit toutefois sa part des fonds fédéraux et investit abondamment dans des programmes et des services à l'enfance et à la famille.

Résultat
stratégique

Amélioration de la sécurité du revenu, accès aux possibilités et mieux être
des personnes, des familles et des collectivités

ACTIVITÉ DE PROGRAMMES : ENFANTS ET FAMILLES

Priorités
2006-2007

- Assurer un soutien et des choix aux familles par le nouveau Plan universel pour la garde d'enfants du Canada et d'autres initiatives déjà lancées en vue de garantir que leurs enfants auront le meilleur départ possible dans la vie.

Résultats
prévus de
l'activité de
programmes

- Soutien des familles à faible revenu ayant des enfants.
- Assurer des choix aux familles en matière de services de garde.

Indicateurs
de
programme

- Incidence de la faiblesse du revenu : évolution du nombre et de la proportion de familles et d'enfants qui, dans une année, restent en deçà du seuil de faible revenu (SFR) après impôt à cause de la Prestation nationale pour enfants.
- Degré de faiblesse du revenu : évolution du montant global de revenu dont auraient besoin dans une année les familles à faible revenu pour atteindre le SFR après impôt à cause de la Prestation nationale pour enfants.
- Nombre d'enfants de moins de six ans à l'égard de qui les parents reçoivent la Prestation universelle pour la garde d'enfants.

Programmes

- Prestation universelle pour la garde d'enfants
- Initiative sur les places en garderie
- Cadre multilatéral pour l'apprentissage et la garde des jeunes enfants
- Ententes de développement de la petite enfance
- Prestation nationale pour enfants

Ressources

DÉPENSES PRÉVUES : 2 282,8 M\$

ETP : 105

ENFANTS ET FAMILLES : PRIORITÉS ET PLANS

Priorité : Assurer un soutien et des choix aux familles par le nouveau Plan universel pour la garde d'enfants du Canada et d'autres initiatives déjà lancées en vue de garantir que leurs enfants auront le meilleur départ possible dans la vie.

Plans :

- Veiller à la bonne application du Plan universel pour la garde d'enfants du Canada par les moyens suivants :
 - Collaborer avec les autres ministères à la mise en application de la Prestation universelle pour la garde d'enfants en juillet 2006
 - Elaborer une stratégie de création de places en garderie en consultation avec les autres ministères, les provinces et territoires, les intervenants et les citoyens
- Application permanente de l'Entente fédérale-provinciale-territoriale sur le développement de la petite enfance et du Cadre multilatéral pour l'apprentissage et la garde des jeunes enfants.

ACTIVITÉ DE PROGRAMMES : ENFANTS ET FAMILLES

Le gouvernement du Canada a adopté en matière des services de garde une nouvelle stratégie qui accorde aux parents la liberté de choisir la possibilité qui répond le mieux à leurs besoins. Avec le Plan universel de la garde d'enfants du Canada, on reconnaît que les familles sont le fondement de la société et on donne aux parents la souplesse voulue pour concilier comme ils l'entendent leur vie professionnelle et leur vie familiale.

Depuis le 1^{er} juillet 2006, toutes les familles sont admissibles à une prestation annuelle de 1 200 \$ pour chaque enfant de moins de six ans. Cette prestation est imposable et elle s'ajoute au revenu du conjoint qui gagne le moins. Le gouvernement adoptera aussi de nouvelles mesures destinées à encourager les employeurs, les organismes sans but lucratif et les places en garderie. À raison de jusqu'à 250 millions de dollars par an, ces nouvelles mesures visent à établir annuellement 25 000 nouvelles places en garderie. Elles seront conçues pour que les familles des villes et des localités rurales et les parents ayant un emploi atypique bénéficient de services de garde. RHDSC continuera à soutenir les enfants et leur famille par la Prestation nationale pour enfants afin que les enfants de familles à faible revenu puissent réaliser entièrement leur potentiel. En outre, comme nous l'avons mentionné plus tôt, RHDSC fournira des conseils d'ordre stratégique sur l'élaboration d'une stratégie complémentaire visant les Autochtones au sujet de l'apprentissage et la garde des jeunes enfants, en collaboration avec d'autres ministères, dont Affaires indiennes et du Nord et Santé Canada.

RHDSC est chargé de l'élaboration des politiques relativement à la Prestation nationale pour enfants et le ministre des Ressources humaines et du Développement social représente le gouvernement du Canada dans cette initiative fédérale-provinciale-territoriale.

Indicateurs de résultats stratégiques

INDICATEURS	
Pourcentage d'enfants de quatre à cinq ans présentant un développement variant de normal à avancé.	Répartition des enfants de zéro à six ans selon le mode principal de garde.
Pourcentage d'enfants de 2002-2003	47 % Garde parentale
86,9 % des enfants de quatre à cinq ans présentent un développement verbal qui varie de moyen à avancé.	2002-2003
NIVEAU ACTUEL	
Pourcentage d'enfants de 2002-2003	53 % Garde dans un autre foyer
45,9 % Garde au foyer	21,6 % de l'enfant
27,8 % Garderie	4,7 % Autre
2004 (valeurs approximatives) :	Enfants de 0 à 12 ans
15,5 % Enfants de moins de 6 ans	24 % Enfants d'âge scolaire (6 à 12 ans)
9,3 % 2002-2003	Problèmes de l'émotivité – anxiété :
16,7 % des enfants de deux à cinq ans montraient des signes de troubles émotifs et d'anxiété.	Hyperactivité/inattention : 5,5 % des enfants de deux à cinq ans présentaient un comportement d'hyperactivité ou d'inattention.
Problèmes d'agression/inconduite : 14,6 % des enfants de deux à cinq ans montraient des signes d'agression ou d'inconduite.	Comportement sociopersonnel convenant à l'âge : 15,7 % des enfants de zéro à trois ans ne présentaient pas un comportement sociopersonnel conforme à leur âge.
Pourcentage d'enfants de familles non dysfonctionnelles.	2002-2003
90,2 % des enfants de zéro à cinq ans appartenaient à des familles non dysfonctionnelles.	

Programme de partenariats pour le développement social (PPDS): Il s'agit d'un programme de financement national qui est géré et exécuté centralement et qui verse des subventions et contributions aux organismes du secteur sans but lucratif qui répondent aux besoins d'inclusion et de développement sociaux des personnes handicapées, des enfants et de leur famille et des autres populations vulnérables ou exclues. Grâce au PPDS, les réseaux liant les organismes sans but lucratif sont renforcés et ils peuvent étendre leur influence sur les plans national, régional et local, accroître la disponibilité et la diffusion de l'information et soutenir la mise en commun des connaissances et le recensement des meilleures pratiques.

Programme Nouveaux horizons pour les aînés (PNHA): Le PNHA subventionne dans tout le pays des projets locaux qui encouragent les personnes âgées à apporter une contribution à leur milieu par leur participation sociale et la vie active. Il incite la population du troisième âge à faire servir ses compétences, son expérience et sa sagesse au mieux-être social dans les collectivités; il favorise l'intégration permanente du troisième âge à la vie communautaire en vue de réduire les risques d'isolement social. Ces fonds viennent aussi renforcer les réseaux et les associations reliant les membres des collectivités, les organismes communautaires et les gouvernements; ils accroissent les possibilités de créer des capacités et des partenariats communautaires en vue de relever les défis sociaux actuels ou nouveaux.

Programme Comprendre la petite enfance (CPE): Le CPE aide les collectivités de tout le pays à mieux comprendre les besoins des jeunes enfants et de leur famille. C'est une initiative nationale qui renseigne les collectivités sur la préparation à l'apprentissage de leurs enfants, sur les facteurs communautaires qui influent sur le développement de l'enfance et sur les ressources locales à la disposition des jeunes enfants et des familles. Les collectivités se servent de ces renseignements pour établir et administrer des politiques, des programmes ou des investissements qui aident la petite enfance à s'épanouir.

INVESTISSEMENT SOCIAL : PROGRAMMES CONTRIBUANT À LA RÉALISATION DES PRIORITÉS

L'activité de programmes Investissement social établit des politiques et administrer des programmes en matière de retraite et d'invalidité à l'intention des Canadiens et il contribue au développement communautaire par la collaboration (partenariats) et l'innovation.

Régime de sécurité de la vieillesse (SV) : Le régime SV procure un revenu de base aux citoyens et aux résidents du Canada qui répondent aux critères d'âge, de résidence et de citoyenneté. Il est financé par le Trésor et il est indexé trimestriellement à l'indice des prix à la consommation. Devant les circonstances financières difficiles que vivent un grand nombre de personnes âgées, il offre, selon le revenu, des prestations supplémentaires aux gens à faible revenu, à savoir le Supplément de revenu garanti (SRG). L'allocation de personne âgée et l'allocation de survivant.

Le SRG est une prestation mensuelle versée aux pensionnés de la SV n'ayant guère d'autre revenu; le montant de la prestation dépend de la situation de famille, de la résidence et du revenu. L'allocation de personne âgée est versée au conjoint de droit ou de fait des pensionnés de la SV ou du SRG.

L'allocation de survivant est versée aux gens à faible revenu de 60 à 64 ans dont le conjoint de droit ou de fait est décédé et qui ne sont pas entrés dans une nouvelle union de droit ou de fait.

Le **Régime de pensions du Canada (RPC)** est un régime d'application fédérale-provinciale (sauf au Québec qui dispose d'un régime comparable). Il offre des prestations en fonction du changement des survivement au cours de la vie. Mieux connu pour ses prestations de retraite, le RPC offre également des prestations au survivant et aux enfants d'un cotisant, d'autres prestations aux personnes handicapées et à leurs enfants, et un montant forfaitaire maximal de 2 500 \$ en cas de décès. C'est un régime contributif auquel cotisent les salariés et les travailleurs indépendants de 18 à 70 ans qui reçoivent un revenu minimal dans l'année civile. Les prestations se calculent selon l'ordre de grandeur et la durée des cotisations. Elles ne sont pas versées automatiquement et chacun doit en faire la demande et prouver son admissibilité. Quelque 12 millions de Canadiens de plus de 18 ans cotisent actuellement au régime chaque année et environ 4 millions en recevront les prestations en 2005-2006.

Programme de subventions d'invalidité du Régime de pensions du Canada (PSIRPC) : Ce sont des prestations payables aux participants qui répondent aux critères de cotisations minimales et dont l'invalidité est « grave et prolongée » selon la définition du législateur. Il s'agit d'une invalidité mentale ou physique qui empêche sa victime de travailler régulièrement à un emploi contre un salaire appréciable. Dans la détermination de l'admissibilité de l'intéressé sur le plan médical, on prend aussi en considération des caractéristiques personnelles comme l'âge, la scolarité et l'expérience professionnelle, mais non des facteurs socio-économiques comme les emplois disponibles. Les enfants des prestataires d'invalidité du RPC sont admissibles à une prestation mensuelle forfaitaire jusqu'à l'âge de 18 ans ou, s'ils font des études à plein temps, jusqu'à l'âge de 25 ans.

Fonds d'intégration pour les personnes handicapées (FIPH) : Le FIPH aide à retourner au travail les personnes handicapées qui, autrement, seraient inadmissibles aux programmes d'emploi du Régime d'assurance-emploi. Grâce à ce financement, celles-ci peuvent mieux se préparer et accéder à un emploi ou à un travail indépendant, et acquérir les compétences nécessaires pour conserver leur emploi. Le FIPH soutient d'autres activités efficaces et novatrices, qu'il s'agisse d'encourager les employeurs à procurer des possibilités d'emploi et de stage, d'aider les travailleurs à relever leurs compétences en matière d'emploi ou à démarrer leur propre entreprise, de collaborer avec les organismes qui s'occupent de la population handicapée, notamment dans le secteur privé, au soutien de modes novateurs d'accèsion des personnes handicapées à l'emploi ou au travail indépendant ou encore de combattre les obstacles à l'activité individuelle sur le marché du travail.

Ententes relatives au marché du travail pour les personnes handicapées (EMTPH) : Les EMTPH aident à améliorer la situation d'emploi des Canadiens handicapés en les rendant plus employables, en accroissant les possibilités d'emploi qui s'offrent à eux et en développant leurs connaissances. Elles facilitent les programmes du marché du travail qui visent la population handicapée par des accords conclus avec les provinces.

Résultat
stratégique

Amélioration de la sécurité du revenu, accès aux possibilités et mieux être des personnes, des familles et des collectivités

ACTIVITÉ DE PROGRAMMES : INVESTISSEMENT SOCIAL

**Priorités
2006-2007**

- Améliorer la sécurité du revenu et la participation active dans les collectivités.
- Abolir les obstacles à une pleine participation à la richesse de la vie canadienne et des collectivités du pays.
- Soutenir les efforts du secteur communautaire sans but lucratif visant à innover, à renforcer les réseaux de collaboration, à créer des capacités et à échanger des pratiques exemplaires pour contribuer au bien-être des communautés.

**Résultats
prévus de
l'activité de
programmes**

- Amélioration de la sécurité du revenu, de l'inclusion sociale, des possibilités et de la participation des Canadiens (plus particulièrement des aînés, des personnes handicapées et des collectivités) par des initiatives propres et par la collaboration avec l'ensemble de nos partenaires.

**Indicateurs
de
programme**

- Proportion des participants qui cotisent ou qui sont admissibles au Programme de prestations d'invalidité de ce régime.
- Nombre de prestations du Programme de prestations d'invalidité du RPC qui indiquent retourner au travail et ne plus toucher de prestations; proportion de ce groupe de clients qui n'a pas touché de prestations pendant six mois et plus.
- Nombre de partenariats établis qui renseignent le public sur les régimes SV- RPC.
- Nombre de participants des programmes et services relevant des Ententes relatives au marché du travail pour les personnes handicapées.
- Nombre et pourcentage de participants à un programme ou à un service relevant des Ententes relatives au marché du travail pour les personnes handicapées par province s'il s'agit d'une intervention ayant des points de départ et d'arrivée bien précis.
- Nombre et pourcentage de participants qui ont obtenu un emploi grâce à un programme ou un service de soutien qui relève des Ententes relatives au marché du travail pour les personnes handicapées.
- Fonds d'intégration pour les personnes handicapées :
 - nombre de clients servis;
 - nombre et pourcentage de clients ayant obtenu un emploi;
 - nombre et pourcentage de clients ayant accru leur employabilité;
 - nombre et pourcentage de clients ayant suivi des cours de perfectionnement (retour aux études);
- Programme de partenariats pour le développement social : création et diffusion du savoir en vue de répondre aux besoins des citoyens en développement social.
- Initiative Comprendre la petite enfance : nombre de collectivités ayant répondu à chaque année à la demande de propositions.
- Programme Nouveaux horizons pour les aînés : nombre de personnes âgées menant des activités relevant des projets financiers et/ou participant à de telles activités au sein de la collectivité.
- Programme de partenariats pour le développement social, Bureau de la condition des personnes handicapées : nombre de projets (accords de contributions) financés.

Programmes

- Régime de sécurité de la vieillesse
- Régime de pensions du Canada
- Programme de prestations d'invalidité du Régime de pensions du Canada
- Fonds d'intégration pour les personnes handicapées
- Ententes relatives au marché du travail pour les personnes handicapées
- Programme de partenariats pour le développement social
- Programme Nouveaux horizons pour les aînés
- Programme Comprendre la petite enfance

Ressources

DÉPENSES PRÉVUES : 57 141,4 M\$

ETP : 767

Priorité : Soutenir les efforts du secteur communautaire sans but lucratif visant à innover, à renforcer les réseaux de collaboration, à créer des capacités et à échanger des pratiques exemplaires pour contribuer au bien-être des collectivités.

Plans :

- Consensir des investissements stratégiques dans des organismes nationaux et des organismes du secteur communautaire sans but lucratif grâce au Programme de partenariats pour le développement social.
- Accroître la participation des aînés dans le troisième appel pour la présentation de programme Nouveaux horizons pour les aînés.
- Favoriser l'innovation sociale et l'entrepreneuriat dans le secteur communautaire sans but lucratif dans un mouvement de durabilisation et d'autonomisation à long terme.
- De nouvelles collectivités participeront à l'initiative Comprendre la petite enfance à l'occasion du deuxième appel de propositions.
- Investir dans l'amélioration des politiques et des programmes de développement de la petite enfance pour les familles des communautés minoritaires de langue officielle.
- Investir stratégiquement en vue de soutenir la participation du secteur communautaire sans but lucratif au dialogue sur les politiques et la mise en commun des pratiques novatrices.
- Créer des outils qui favoriseront la croissance et l'innovation pour le développement socio-économique des collectivités.
- Faire preuve de leadership et soutenir les autres ministères fédéraux dans leurs efforts de collaboration avec le secteur communautaire sans but lucratif.

Le Programme de partenariats pour le développement social (PPDS) de RHDSC continuera à soutenir les organismes communautaires sans but lucratif soucieux de répondre aux besoins de développement social des personnes handicapées, des enfants et de leur famille, sans oublier les autres populations vulnérables ou exclues au pays.

Le Ministère continuera à tenir l'engagement pris dans le Plan d'action pour les langues officielles, c'est-à-dire donner aux organismes non gouvernementaux nationaux de meilleurs moyens de promouvoir l'adoption de politiques, de programmes et de services d'apprentissage et de garde d'enfants qui sont linguistiquement et culturellement adaptés.

INVESTISSEMENT SOCIAL : PRIORITÉS ET PLANS

<p>Priorité : Améliorer la sécurité du revenu et la participation active dans les collectivités.</p>	<p>Plans :</p> <ul style="list-style-type: none">• Établir et appliquer un plan visant à renseigner la population sur le système du revenu de retraite et son rôle à cet égard, et viser notamment les Autochtones des réserves.• Créer un Conseil des aînés qui contribuera à l'élaboration d'un programme de politiques publiques et un plan d'action pour le troisième âge.
<p>Priorité : Abattre les obstacles à la pleine participation à la richesse de la vie canadienne et des collectivités du pays.</p>	<p>Plans :</p> <ul style="list-style-type: none">• Faire de la recherche-développement sur les questions d'invalidité et travailler à l'adoption d'une loi nationale sur les personnes handicapées.• Élargir les ententes relatives au marché du travail pour qu'elles s'appliquent aux personnes handicapées.• Contribuer à l'examen triennal du Régime de pensions du Canada en pilotant l'adoption de modifications visant à assouplir les critères d'admissibilité à l'intention des cotisants à long terme qui demandent des prestations d'invalidité du RPC, ainsi que d'autres modifications secondaires, et en planifiant leur éventuelle mise en application.• Entreprendre la phase I d'une évaluation complète du Programme de prestations d'invalidité du RPC (PPRPC), ce qui doit comprendre l'examen des études et des données existantes, des interviews auprès de personnes renseignées et l'étude des éléments d'interaction de ce programme et des autres programmes de revenu d'invalidité.• Introduire les données administratives du PPRPC dans les centres de données de recherche de Statistique Canada pour que les chercheurs universitaires puissent enrichir l'information disponible sur les prestations d'invalidité du RPC.• Améliorer la connaissance, la cohérence et la gestion horizontale des politiques et des programmes d'invalidité tant à RHDSC que dans tout le gouvernement canadien.• Servir au sein du gouvernement canadien de point national de convergence pour les partenaires nationaux et internationaux qui oeuvrent pour la participation entière de la population handicapée.• Soutenir les communautés minoritaires de langue officielle pour qu'elles s'engagent dans des voies nouvelles par leur collaboration à l'établissement des politiques ministérielles.

s'intéresser aux pays ayant des régimes de retraite comparables avec lesquels il est possible de coordonner les prestations canadiennes. En 2006-2007, ces pays sont notamment la Pologne, la Serbie, la Macédoine et Israël.

Programmes de prestations d'invalidité

RHDSC est le ministère qui s'occupe principalement des questions relatives aux personnes handicapées au gouvernement du Canada. Le Bureau de la condition des personnes handicapées (BCPH) sera le point national de convergence au sein du gouvernement du Canada pour les partenaires qui veillent à assurer la pleine participation des personnes handicapées à tous les aspects de la vie sociale et communautaire. RHDSC veillera à mieux faire connaître les questions relatives aux personnes handicapées, à en assurer la cohérence et la gestion horizontale au sein du ministère et dans l'ensemble du gouvernement. Il servira aussi de modèle d'accessibilité au gouvernement fédéral et prêchera par l'exemple de manière à promouvoir l'accessibilité des lieux de travail partout dans l'administration publique.

Par l'élaboration et la diffusion du Rapport fédéral sur la situation des personnes handicapées et en collaboration avec Statistique Canada en ce qui concerne l'Enquête sur la participation et les limitations d'activités de 2006, RHDSC favorisera l'acquisition et le partage de connaissances sur les questions d'invalidité de manière à éclairer l'adoption de politiques et de programmes. Il continuera aussi à sensibiliser et à mobiliser les partenaires, les citoyens et les intervenants provinciaux et territoriaux afin d'améliorer les politiques et les programmes qui visent la population handicapée.

Programme de prestations d'invalidité du RPC

Il y a aussi les prestations d'invalidité que verse à la population admissible le Régime de pensions du Canada pour favoriser une meilleure participation socio-économique des personnes handicapées. Le Programme de prestations d'invalidité du RPC est le premier régime d'assurance en importance pour l'invalidité de longue durée. En 2005-2006, il a versé trois milliards de dollars en prestations à 291 000 personnes et à 84 000 de leurs enfants. Pour ce qui est de la responsabilité du ministre à l'égard du régime d'appels RPC-SV, il faut constamment assurer l'équité et la rapidité de la révision et des appels et déterminer les améliorations à apporter au processus, en consultation avec les deux tribunaux administratifs indépendants. En 2005-2006, environ 62 000 nouvelles demandes ont été reçues. Parmi les priorités ministérielles, il y a la contribution au volet « invalidité » de l'examen triennal du RPC en ce qui concerne les modifications à apporter aux régimes publics de retraite en fonction des besoins actuels et futurs des bénéficiaires. Un train de mesures de soutien est en voie de révision pour mieux aider les bénéficiaires qui veulent revenir sur le marché du travail. L'amélioration des mécanismes de coordination avec les assureurs privés, les régimes provinciaux d'aide sociale et les commissions des accidents du travail au nom des clients communs demeure hautement prioritaire. Enfin, on établira, grâce à un certain nombre d'activités prioritaires en 2006-2007, le fonds de données de recherche et de données probantes du Programme de prestations d'invalidité du Régime de pensions du Canada.

Développement communautaire et partenariats

RHDSC s'est aussi engagé à appuyer les efforts du secteur communautaire sans but lucratif en vue d'innover, de renforcer les réseaux de collaboration, de développer les capacités et de mettre en commun les bonnes pratiques pour ainsi contribuer au bien-être communautaire. En 2006-2007, il continuera à diverses activités d'aide aux collectivités par des subventions, des contributions et divers autres moyens de financement. Ainsi, le programme Nouveaux horizons pour les aînés (PNHA) continuera à accroître la participation et la contribution sociales des personnes âgées à leur collectivité et à réduire l'isolement des membres vulnérables du troisième âge.

Par ailleurs, l'Initiative Comprendre la petite enfance (CPE) est en cours dans 21 collectivités canadiennes. En 2006-2007, un certain nombre d'autres collectivités pourront participer à cette initiative.

Comme il est le coordonnateur principal des questions relatives aux aînés, RHDSC a établi le Secrétariat des politiques sur les aînés et les pensions afin de coordonner les efforts visant à définir les problèmes et les possibilités que présentent l'accroissement de la population aînée et de prendre des initiatives. Jusqu'à présent, il y a eu notamment les travaux du forum fédéral-provincial-territorial des ministres responsables des aînés et du comité interministériel réunissant les ministères et organismes fédéraux ayant des responsabilités semblables, ainsi que des efforts permanents en vue de faire participer les aînés et les organismes intervenants à l'examen des questions d'intérêt pour le troisième âge.

En 2006-2007, RHDSC continuera à élaborer pour cette partie de la population un plan d'action qui tient compte des besoins et des possibilités associées aux générations du troisième âge d'aujourd'hui et de demain. Outre ce plan d'action, il formera un Conseil des aînés chargé de conseiller le ministre sur les questions d'intérêt national.

RHDSC examine aussi constamment s'il y a lieu de modifier les régimes publics de retraite au Canada pour qu'ils répondent aux besoins socio-économiques actuels et futurs des bénéficiaires. Cette activité fait partie d'un exercice régulier de révision triennale du RPC, tout comme l'activité pouvant mener à des modifications de la Loi sur la sécurité de la vieillesse.

Par les activités de sensibilisation, RHDSC veillera aussi à ce que les Canadiens soient bien informés, grâce aux initiatives de sensibilisation prises par Service Canada, au sujet du système canadien de revenu de retraite et de leurs droits à des prestations. On s'efforcera en particulier de répondre aux besoins des groupes vulnérables (sans-abri, Autochtones des réserves, personnes handicapées, immigrants, etc.) et des jeunes Canadiens afin qu'ils sachent bien ce qu'ils doivent faire en vue de préparer leur retraite.

Maintenant que cinquante accords internationaux ont été signés en matière de sécurité sociale, on veillera à ce que les ententes en place continuent à répondre aux besoins du troisième âge tant au Canada qu'à l'étranger. Notre pays a conclu en 2005 avec l'Estonie, la Lettonie et la Lituanie des accords qui entreront en vigueur le 1^{er} novembre 2006. Un accord signé avec le Japon tôt en 2006 devrait prendre effet vers la fin de 2007. Le Ministère révisé actuellement l'accord passé avec la Norvège. Il continuera à

Indicateurs de résultats stratégiques		Niveau actuel	
Nombre et proportion de personnes de 65 ans et plus ayant un bas revenu familial	1 995 800 52,4 % (2003)	258 400 6,8 %	2003
Nombre et proportion de personnes de 65 ans et plus qui auraient un faible revenu sans l'aide de l'État			
Montant de revenu moyen par lequel les personnes à faible revenu de 65 ans et plus n'atteignent pas le SFR correspondant sans l'aide du régime public de retraite	2003 3 488 \$		
Paiements combinés RPC-SV-SRG en moyenne annuelle au troisième âge (population de plus de 65 ans) en proportion de la rémunération annuelle moyenne dans l'industrie	2005 40,5 %		
Revenu tiré du régime SV en proportion de tous les revenus des personnes âgées à la retraite	2003 23,1 %		
Revenu tiré du régime SV en proportion de tous les revenus à la retraite des personnes âgées à faible revenu	2003 58,0 %		
Revenu tiré du RPC en proportion de tous les revenus des personnes âgées à la retraite	2003 18 %		
Résidents du Canada recevant des prestations d'autres pays dans le cadre d'un accord international en matière de sécurité sociale	2004 170 936		
Contribution du Programme de prestations d'invalidité du FRC au soutien du revenu des bénéficiaires, apport mesuré par l'ensemble des prestations d'invalidité en proportion du revenu « toute provenance » (mesure établie tous les trois ans à l'aide des données fiscales)			
Nouvelle mesure visant à établir des données de référence			

RHDSC offre un soutien du revenu aux personnes âgées par l'intermédiaire du Régime de pensions du Canada (RPC) et du régime de Sécurité de la vieillesse (SV). Grâce à ces deux régimes qu'il administre, le Ministère garantit une source stable de revenu à 4,6 millions de personnes âgées.

Aînés et pensions

RHDSC administre d'importants programmes qui sont essentiels à l'amélioration des investissements sociaux consentis au profit des Canadiens. Ces programmes relèvent des secteurs d'activité suivants : Aînés et pensions, Programmes pour les personnes handicapées, Programme de prestations d'invalidité du Régime de pensions du Canada, Développement communautaire et partenariats.

ACTIVITÉ DE PROGRAMMES : INVESTISSEMENT SOCIAL

À cette fin, le Ministère s'emploiera à offrir aux Canadiens des mesures de soutien afin qu'ils puissent jouir d'une meilleure sécurité de leur revenu, d'un meilleur accès aux possibilités qui s'offrent ainsi que de conditions de bien-être. Les priorités et les plans de RHDSC visent trois grandes activités de programmes : Investissement social, Enfants et familles et Logement et sans-abri.

Malgré son succès économique actuel, le Canada doit constamment relever de nombreux défis sociaux qui commandent toute notre attention et nos moyens. Les personnes, les familles et les collectivités ont à faire face aux conséquences d'une diversité de phénomènes, qu'il s'agisse de l'évolution de la structure et de la dynamique familiales, du vieillissement de la population, des problèmes d'insuffisance du revenu ou de la sécurité et de l'abordabilité du logement. RHDSC veille avec les intervenants, les provinces et les territoires à chercher et dégaier des solutions à ces problèmes.

RHDSC continue à établir et à bonifier des investissements sociaux pour les Canadiens. Il réévalue sans cesse les programmes sociaux de base qui visent les enfants, les personnes âgées, les personnes handicapées et les sans-abri et s'assure ainsi que ces programmes continuent à répondre aux besoins nouveaux de la population. S'il constate des lacunes, il se dote de nouveaux programmes pour répondre aux besoins. À titre d'exemple, mentionnons le Plan universel pour la garde d'enfants du Canada, qui est conçu pour aider à répondre aux besoins des familles ayant des enfants de moins de six ans.

La prospérité économique du Canada, le dynamisme de son marché du travail et les perspectives favorables qui s'offrent à notre pays sont étroitement liés à la sécurité et au bien-être des Canadiens, des familles et des collectivités. Les moyens par lesquels les gens assurent la sécurité de leur revenu, le soin et le soutien d'une famille et leur participation à la vie communautaire contribuent à leur bien-être et à leur inclusion dans la société canadienne.

AMÉLIORATION DE LA SÉCURITÉ DU REVENU, ACCÈS AUX POSSIBILITÉS ET MIEUX ÊTRE DES PERSONNES, DES FAMILLES ET DES COLLECTIVITÉS

Résultat stratégique

TRAVAIL : RESSOURCES HUMAINES ET FINANCIÈRES – DÉPENSES PRÉVUES

RESSOURCES FINANCIÈRES ET HUMAINES			
Dépenses prévues			
	2005-2006	2006-2007	2007-2008
RESSOURCES FINANCIÈRES (en millions de dollars)			
Dépenses de fonctionnement brutes	90,6	92,9	93,2
Subventions et contributions non législatives	3,9	3,9	3,9
Paiements de transferts législatifs	28,7	28,7	28,7
Paiements d'indemnités aux travailleurs	126,0	129,0	131,0
Total	249,2	254,5	256,8
RESSOURCES HUMAINES			
Équivalents temps plein	904	916	920

RESSOURCES FINANCIÈRES DÉTAILLÉES PAR PROGRAMMES OU SERVICE			
	2006-2007	2007-2008	2008-2009
RESSOURCES FINANCIÈRES (en millions de dollars)			
Service fédéral de médiation et de conciliation	7,9	8,0	8,0
Opérations nationales du travail	171,1	174,8	176,7
Affaires intergouvernementales et internationales du travail	5,9	5,9	5,9
Politique et information sur le milieu de travail	36,1	36,1	36,1
Répartition des services ministériels ^a	26,8	28,3	28,7
Autres	1,4	1,4	1,4
Total	249,2	254,5	256,8
RESSOURCES HUMAINES			
Équivalents temps plein	904	916	920

^a La portion des services ministériels liés au bureau du Ministre, au bureau du Sous-Ministre, au bureau du Contrôleur et des Services partagés a été divisée entre chaque résultat stratégique.

Activité de Programmes Travail – Modifications de l'Architecture des activités de programmes 2005-2006 :

- Les anciennes sous-activités Affaires intergouvernementales du travail et Affaires internationales du travail ont été réunies en une nouvelle sous-activité de programmes appelée Affaires internationales et intergouvernementales du travail.
- L'ancienne sous-activité de programmes Affaires autochtones en matière de travail a été supprimée.

TRAVAIL : PROGRAMMES CONTRIBUANT À LA RÉALISATION DES PRIORITÉS

L'activité du Programmes du Travail assure la promotion et le maintien de relations industrielles stables et d'un milieu de travail sécuritaire, juste, sain, équitable et productif dans l'administration de la main-d'œuvre fédérale. À l'échelle nationale, ce programme recueille et transmet de l'information sur les milieux de travail et la main-d'œuvre, élabore des politiques et favorise la coordination des activités des administrations canadiennes du travail. Enfin, il gère les affaires internationales du travail pour le Canada.

http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/travail.shtml

Service fédéral de médiation et de conciliation : Ce service est chargé d'offrir de l'aide en prévention et en règlement des conflits aux syndicats et aux employeurs en vertu de la partie I (Relations industrielles) du Code canadien du travail; il favorise des relations syndicales-patronales harmoniser dans l'ensemble de l'économie.

http://www.rhdcc.gc.ca/asp/passezelle.asp?hr=fr/pt/sfmc/1/Service_federal_de_mediation_et_de_conciliation.shtml&hs=

Opérations nationales du travail : Cette direction, tant à l'administration centrale que dans ses cinq régions, veille à l'application des lois et des règlements en vertu de la partie II (Santé et sécurité au travail) et de la partie III (Normes du travail) du Code canadien du travail, ainsi que de la Loi sur l'équité en matière d'emploi, du Programme de contrats fédéraux pour l'équité en matière d'emploi, de la Loi sur les justes salaires et les heures de travail et de la Loi sur la santé des non-fumeurs. La Direction nationale des opérations du travail est également chargée de l'administration de la Loi sur l'indemnisation des agents de l'État et de la Loi sur l'indemnisation des marins marchands. De plus, elle administre les Services de protection contre l'incendie au nom du Conseil du Trésor.

http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/travail.shtml

Affaires internationales et intergouvernementales du travail : Cette Direction veille à l'élaboration, au respect et à l'application de principes du travail reconnus à l'échelle internationale; elle favorise aussi la collaboration et la coordination entre les administrations canadiennes relativement aux affaires nationales et internationales du travail et facilite le dialogue avec les intervenants des programmes.

http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/travail.shtml

Politiques et information sur les milieux de travail : Cette Direction recense les nouvelles tendances et les changements dans les milieux de travail, elle élabore et propose des initiatives en matière de politique du travail, gère une base de données nationales sur les conventions collectives, effectue des recherches sur les relations du travail et transmet des recherches, des analyses et des renseignements importants. Elle est également chargée de la conception et de la réalisation du Programme de protection des salariés. Une fois établis, les fonds d'exécution de ce programme seront transférés à Service Canada.

http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/travail.shtml

Résultat
stratégique

Milieus de travail sécuritaires, sains, équitables, stables, productifs, où règne la coopération, et normes internationales du travail efficaces

ACTIVITÉ DE PROGRAMMES : TRAVAIL

Priorités
2006-2007

- Procéder à un examen détaillé de la partie III (Normes du travail) du *Code canadien du travail*.
- Elaborer des options de politique pour un système fédéral modernisé d'indemnisation des accidentés du travail, notamment une stratégie fédérale de gestion de l'invalidité.
- Terminer les préparatifs du Programme de protection des salariés.
- Procéder à l'examen parlementaire de la *Loi sur l'équité en matière d'emploi*.

Résultats
prévus de
l'activité de
programmes

- Relations patronales-syndicales de prudence et de stabilité dans les lieux de travail sous réglementation fédérale.
- Lieux de travail sécuritaires, sains et équitables dans le domaine de compétence fédérale.
- Meilleure sensibilisation aux pratiques et aux règlements de santé-sécurité au travail.
- Respect des engagements internationaux du Canada en matière de travail.
- Acroissement de la collaboration et de la concertation dans les dossiers nationaux et internationaux du travail par la promotion d'un dialogue entre les gouvernements fédéral et provinciaux-territoriaux et entre les organismes publics et les organismes patronaux et syndicaux.

Indicateurs
de
programme

- Pourcentage de conflits de négociation collective réglés en vertu de la Partie I (relations industrielles) du *Code canadien du travail* sans arrêt de travail.
- Pourcentage de plaintes pour congédiement injuste réglées par les inspecteurs (partie III du *Code canadien du travail*).
- Taux de fréquence des accidents invalidants (TFAI) mesurant l'évolution d'année en année de la proportion de blessures et de maladies avec perte de temps et de décès dans les industries relevant de la compétence fédérale.
- Pourcentage de fonds reçus par rapport aux fonds dus en règlement de plaintes relevant de la partie III (normes du travail) du *Code canadien du travail* (les plaintes pour congédiement injuste sont exclues).
- Satisfaction du client à l'égard de la qualité des données de la Direction de l'information sur les milieux de travail.

Programmes

- Service fédéral de médiation et de conciliation
- Opérations nationales du travail
- Affaires internationales et intergouvernementales du travail
- Politiques et information sur les milieux de travail

Ressources

DÉPENSES PRÉVUES : 249,2 M\$

ETP : 904

L'approche fédérale de l'équité salariale est en cours d'évaluation depuis un certain temps. Il s'agit d'un enjeu complexe et difficile qui touche les droits de la personne, les pratiques de gestion des ressources humaines, les conventions collectives et les conditions de travail, et où il est difficile d'obtenir un consensus entre les intervenants.

La Loi sur le Programme de protection des salariées a été adoptée en novembre 2005 pour rétablir la rémunération et les vacances annuelles non payées aux travailleurs dont l'employeur a déclaré faillite ou est mis sous séquestre en vertu de la Loi sur la faillite et l'insolvabilité. La nouvelle loi n'est pas encore en vigueur; le Programme du Travail, Service Canada et les ministères provinciaux du Travail devront approfondir la conception et l'application du programme.

TRAVAIL : PRIORITÉS ET PLANS

<p>Priorité : Procéder à un examen détaillé de la partie III (Normes du travail) du Code canadien du travail.</p>	
<p>Plans :</p> <ul style="list-style-type: none"> Recevoir le rapport final du commissaire indépendant. Elaborer des options stratégiques en réaction aux recommandations. 	
<p>Priorité : Elaborer des options de politique pour un système fédéral modernisé d'indemnisation des accidentés du travail, notamment une stratégie fédérale de gestion de l'invalidité.</p>	
<p>Plan :</p> <ul style="list-style-type: none"> Effectuer les recherches et les autres préparatifs requis pour procéder à la réforme du système. 	<p>Priorité : Terminer les préparatifs du Programme de protection des salariés.</p>
<p>Plan :</p> <ul style="list-style-type: none"> Rédiger le règlement et préparer la mise en œuvre de la nouvelle loi. 	
<p>Priorité : Procéder à l'examen parlementaire de la Loi sur l'équité en matière d'emploi.</p>	
<p>Plan :</p> <ul style="list-style-type: none"> Rédiger le rapport quinquennal du ministre du Travail, qui devrait comprendre une analyse socio-économique de la situation actuelle des groupes désignés, la présentation des données administratives sur la progression des programmes et la description des progrès de l'application des recommandations faites par le Comité dans l'examen précédent. 	

Résultat stratégique



MILIEUX DE TRAVAIL SÉCURITAIRES, SAINS, ÉQUITABLES, STABLES, PRODUCTIFS, OÙ RÉGNE LA COOPÉRATION, ET NORMES INTERNATIONALES DU TRAVAIL EFFICACES

ACTIVITÉ DE PROGRAMMES : TRAVAIL

Pour que le Canada puisse soutenir la concurrence internationale et offrir des emplois stables et enrichissants, il faut que les milieux de travail soient hautement productifs. Pour ce faire, il est essentiel d'établir un bon équilibre entre les intérêts des salariés, des syndicats et des employeurs et une réglementation syndicale moderne et efficace constituant la structure fondamentale de la relation professionnelle entre les employeurs et les salariés.

Le Programme Travail, qui permettra d'atteindre ce résultat stratégique, vise à ce que les Canadiens travaillent dans des milieux sains, sécuritaires, justes, stables, coopératifs et productifs qui contribuent au bien-être social et économique de toute la population, et que l'économie internationale respecte de plus en plus les droits fondamentaux des travailleurs.

Au cours de l'exercice 2006-2007, le Programme du Travail concentrera ses énergies sur plusieurs activités. L'examen détaillé et indépendant de la Partie III (normes du travail) du *Code canadien du travail* aboutira à des recommandations visant à ce que les normes fédérales d'emploi répondent à l'évolution du monde du travail. Les recommandations d'ordre législatif ou non seront soumises au ministre du Travail.

La modernisation du Système fédéral d'indemnisation des accidents du travail servira de cadre aux stratégies de prévention efficaces et à la gestion des demandes d'indemnité pour réduire la fréquence et l'incidence des accidents en milieu de travail.

À titre d'exigence législative, la *Loi sur l'équité*

en matière d'emploi est examinée par le Parlement tous les cinq ans, et le prochain examen devrait se faire en 2006. Il est effectué par le comité permanent responsable de la loi. Les partenaires fédéraux, comme la Commission canadienne des droits de la personne et l'Agence de gestion des ressources humaines de la fonction publique, y collaborent. On s'attend à ce que le ministre du Travail présente un rapport quinquennal comprenant un résumé de l'état d'avancement depuis le dernier examen.

Indicateurs de résultats stratégiques	
INDICATEURS	NIVEAU
Pourcentage de tous les jours de travail perdus par arrêt de travail (dans le domaine de compétence fédérale)	
Représentation des groupes désignés dans toutes les professions et main-d'œuvre disponible, employés visés par le régime d'équité en matière d'emploi institué par le législateur	Représentation des groupes désignés (2004)
	Femmes 43,4 %
	Autochtones 1,7 %
	Membres de minorités visibles 13,5 %
	Personnes handicapées 2,5 %
	Main-d'œuvre disponible (2001)
	Femmes 47,3 %
	Autochtones 2,6 %
	Membres de minorités visibles 12,6 %
	Personnes handicapées 5,3 %

APPRENTISSAGE : RESSOURCES FINANCIÈRES ET HUMAINES – DÉPENSES PRÉVUES

Analyse des plans, des priorités et des activités des programmes selon les résultats stratégiques

RESSOURCES FINANCIÈRES ET HUMAINES			
Dépenses prévues			
	2006-2007	2007-2008	2008-2009
RESSOURCES FINANCIÈRES (en millions de dollars)			
Dépenses de fonctionnement brutes	162,5	159,0	163,4
Subventions et contributions non législatives	45,1	50,6	35,9
Palements de transfert législatifs	1 019,6	998,4	1 022,1
Total des dépenses brutes	1 227,2	1 208,0	1 221,4
Prêts consentis en vertu de la Loi fédérale sur l'aide financière aux étudiants	981,5	769,1	560,8
Total	2 208,7	1 977,1	1 782,2
RESSOURCES HUMAINES			
Équivalents temps plein	589	514	496

RESSOURCES FINANCIÈRES DÉTAILLÉES PAR PROGRAMMES OU SERVICE			
	2006-2007	2007-2008	2008-2009
RESSOURCES FINANCIÈRES (en millions de dollars)			
Aide financière aux étudiants	1 486,2	1 278,2	1 076,7
Programme canadien pour l'épargne-études	634,2	610,3	634,4
Programme sur l'apprentissage des adultes, l'alphabétisation et les compétences essentielles	51,8	57,0	41,0
Mobilité académique internationale	4,0	4,0	4,0
Répartition des services ministériels ^a	25,0	22,6	21,9
Autres	7,5	5,0	4,2
Total	2 208,7	1 977,1	1 782,2
RESSOURCES HUMAINES			
Équivalents temps plein	589	514	496

^a La portion des services ministériels liés au bureau du Ministre, au bureau du Sous-Ministre, au bureau du Contrôleur et des Services partagés a été divisée entre chaque résultat stratégique.

Activité de programmes Apprentissage – Modifications de l'Architecture des activités de programmes 2005-2006 :

- Dans le cadre de la sous-activité Aide financière aux étudiants, l'ancienne sous-activité Subvention canadienne pour études devient Subventions et comprend désormais les subventions canadiennes pour accès et pour études.
- L'ancienne sous-activité Programme canadien pour l'épargne-études comprend désormais le Bon d'études canadien et la Subvention canadienne pour l'épargne-études.
- Le programme Apprentissage des adultes, alphabétisation et compétences essentielles réunit trois anciens programmes dans un même cadre de conditions et modalités, à savoir le Secrétariat national à l'alphabétisation, le Bureau des technologies d'apprentissage et le Programme des initiatives d'apprentissage.

APPRENTISSAGE : PROGRAMMES CONTRIBUANT À LA RÉALISATION DES PRIORITÉS

L'activité de programmes Apprentissage contribue aux importants investissements du gouvernement du Canada dans les compétences et l'apprentissage afin d'aider les Canadiens à acquérir tout au long de leur vie la formation et les compétences leur permettant d'occuper une plus grande place dans une économie et une société fondées sur le savoir. Les programmes de ce secteur, qui sont réalisés à l'échelle nationale par RHDSC, sont notamment des programmes de prêts et bourses qui favorisent l'accès à l'éducation postsecondaire et l'épargne-études et des programmes de subventions et contributions qui visent la mobilité internationale des étudiants, l'apprentissage des adultes, l'alphabétisation et les compétences essentielles.

Aide financière aux étudiants : le *Programme canadien de prêts aux étudiants (PCPE)* et les *Subventions canadiennes pour accès et pour études (SCA et SCE)* rendent l'éducation postsecondaire plus accessible aux gens ayant un besoin financier démontré et atténuent les problèmes financiers par des prêts et bourses. Ce programme comprend des mesures de gestion de la dette à l'intention des emprunteurs en situation de remboursement, par le congé d'intérêts, la réduction ou la remise de dette en cas d'invalidité permanente ou de décès de l'emprunteur admissible. Composer les adresses <http://www.rhdcc.gc.ca/fr/passezelles/topiques/cxp-gxr.shtml> et <http://www.cibleetudes.ca/cgi-bin/gateway/canlearn/fr/parent.asp>

Programme canadien pour l'épargne-études (PCEE) : *Subvention canadienne pour l'épargne-études (SCFE)* et *Bon d'études canadien (BEC)* : Le PCEE et le BEC encouragent les Canadiens à épargner dans un régime enregistré d'épargne-études (REEE) en vue de l'éducation postsecondaire de leurs enfants en leur octroyant des subventions. Le BEC s'adresse plus précisément aux familles canadiennes à faible revenu à cette fin. Composer l'adresse <http://www.rhdcc.gc.ca/fr/passezelles/topiques/cgs-gxr.shtml>

Apprentissage des adultes, alphabétisation et compétences essentielles (AAACE) : Le 23 mars 2006, le Conseil du Trésor a approuvé l'unification en un même programme de trois des programmes de subventions et de contributions du Ministère. Ainsi, le programme Apprentissage des adultes, alphabétisation et compétences essentielles réunit le Programme national d'alphabétisation, le Bureau des technologies d'apprentissage et le Programme des initiatives d'apprentissage dans un même cadre de modalités et autres conditions. L'AAACE vise à réduire les obstacles non financiers à l'apprentissage des adultes par les quatre volets de programme suivants :

- Favoriser l'acquisition, le transfert et l'application de connaissances dans le grand domaine de l'apprentissage des adultes, de l'alphabétisation et des compétences essentielles
- Contribuer à l'élaboration de méthodes novatrices d'apprentissage des adultes, d'alphabétisation et d'acquisition des compétences essentielles
- Renforcer les capacités dans les trois secteurs en question
- Promouvoir l'apprentissage des adultes, l'alphabétisation et des compétences essentielles. Composer l'adresse <http://www.rhdcc.gc.ca/fr/pip/daa/bta/PAAACEA.shtml>

Mobilité académique internationale (MAI) : Le programme Mobilité académique internationale favorise l'acquisition de compétences et de connaissances sur le plan international et leur compréhension par les étudiants; il valorise la collaboration dans le domaine de l'enseignement et l'établissement de liens entre les collèges et les universités. Composer l'adresse http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/mai.shtml

Résultat
stratégique

Productivité et participation canadiennes accrues par des marchés du travail efficaces et
inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage

ACTIVITÉ DE PROGRAMMES : APPRENTISSAGE

Priorités
2006-2007

- Continuer d'évaluer les options en matière de programmes et de politiques pour éliminer les obstacles, financiers ou non, à l'accès aux études postsecondaires et à l'apprentissage continu.
- Mettre en œuvre le programme d'apprentissage des adultes, d'alphabétisation et de compétences essentielles et conclure la mise en œuvre du Bon d'études canadien.

Résultats
prévus de
l'activité de
programmes

- Réduire les obstacles financiers à l'accès aux études postsecondaires.
- Réduire les obstacles non financiers à l'accès à l'apprentissage des adultes.
- Mieux sensibiliser les gens aux avantages de l'apprentissage continu et de l'alphabétisation.
- Accroître l'accès à l'éducation sur le plan international.

Indicateurs de
programme

- Taux de défaut de remboursement des prêts sur trois ans (prêts directs seulement pour 2006-2007).
- Nombre de Canadiens n'ayant jamais reçu la Subvention canadienne pour l'épargne-études et qui fréquentent un établissement d'enseignement postsecondaire dans l'exercice en cours.
- Pourcentage de Canadiens de moins de 18 ans qui n'ont jamais reçu la Subvention canadienne pour l'épargne-études.
- Pourcentage d'enfants admissibles au Bon d'études canadien et inscrits à un régime enregistré d'épargne-études.
- Satisfaction des clients à l'égard de la qualité générale des services assurés par le Programme canadien de prêts aux étudiants.
- Satisfaction des clients (fournisseurs de régimes enregistrés d'épargne-études) à l'égard de la qualité générale des services assurés par le Programme canadien pour l'épargne-études.

Programmes

- Aide financière aux étudiants
- Programme canadien pour l'épargne-études
- Programme Apprentissage des adultes, alphabétisation et compétences essentielles
- Mobilité académique internationale

Ressources

DÉPENSES PRÉVUES : 2 208,7 M\$

ETP : 589

APPRENTISSAGE : PRIORITÉS ET PLANS

<p>Priorité : Continuer d'évaluer les options en matière de programmes et de politiques pour éliminer les obstacles, financiers ou non, à l'accès aux études postsecondaire et à l'apprentissage continu.</p>	<p>Plans :</p> <ul style="list-style-type: none"> • Poursuivre l'examen du Programme canadien de prêts aux étudiants, ce qui comprend une étude du cadre d'évaluation des besoins. • Mettre en œuvre les changements relatifs aux contributions parentales que prévoit le budget 2006 pour le Programme canadien de prêts aux étudiants. • Faire l'examen des services d'aide à la gestion de la dette et à l'apprentissage à temps partiel. • Continuer avec les provinces et les territoires à établir un diagnostic pour bien doser les prêts, les subventions et les instruments de gestion d'endettement en fonction des besoins des étudiants appartenant à des ménages à faible ou moyen revenu. 	<p>Priorité : Mettre en œuvre le programme d'apprentissage des adultes, d'alphabétisation et de compétences essentielles et conclure la mise en œuvre du Bon d'études canadien.</p>	<p>Plans :</p> <ul style="list-style-type: none"> • Terminer l'élaboration et la mise en œuvre d'un programme Apprentissage des adultes, alphabétisation et compétences essentielles, qui intègre et exploite les atouts du Programme national d'alphabétisation, du Bureau des technologies d'apprentissage et du Programme des initiatives d'apprentissage par une mise en commun des objectifs, des résultats et des méthodes. • Renforcer le leadership fédéral en faisant la promotion de l'apprentissage continu, de l'alphabétisation et de l'acquisition de compétences essentielles et en réduisant les obstacles non financiers à l'apprentissage par une meilleure sensibilisation du public, par l'établissement d'un fonds de recherches et de connaissances pour un changement à long terme, par le soutien des initiatives d'apprentissage dans les domaines de priorité fédéraux et par le renforcement de la reddition de comptes et de la mesure des résultats. • Prendre des mesures visant à mieux sensibiliser les Canadiens au Bon d'études canadien et à l'importance de la planification et de l'épargne pour l'éducation postsecondaire, ce qui comprend la Stratégie pancanadienne communautaire d'incitation à l'épargne-études. • Continuer à collaborer avec l'Alberta à l'exécution de son plan du centenaire pour l'épargne-études.
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ACTIVITÉ DE PROGRAMMES : APPRENTISSAGE

L'apprentissage continu est essentiel au bien-être individuel des Canadiens, ainsi qu'à la productivité, à la compétitivité et à la prospérité du Canada. Une économie axée sur le savoir crée de plus en plus d'emplois exigeant une scolarisation et une qualification supérieures. Pour l'avenir, on estime que les deux tiers environ de tous les nouveaux emplois des dix prochaines années appartiendront au domaine de la gestion ou exigeront des études postsecondaires sous une forme ou une autre. Cette réalité nous impose des efforts concertés en vue de soutenir une main-d'œuvre hautement qualifiée et adaptable.

Indicateurs de résultats stratégiques

INDICATEURS		NIVEAU ACTUEL	
Pourcentage de la population titulaire d'un diplôme ou d'un grade postsecondaire		2004	2002
		25-64 ans = 44,6 %	36,7 %
		25-34 ans = 53,3 %	
		35-64 ans = 41,8 %	

Fréquentation du palier postsecondaire chez les 18 à 21 ans selon le quartile de revenu familial après impôt		Fréquentation du palier postsecondaire (2001)	
Quartile familial après impôt		Université	Collège
		Intérieur	Intérieur
		21 %	30 %
		Intermédiaire	Intermédiaire
		25 %	32 %
		Intérieur	Intérieur
		30 %	37 %
		Supérieur	Supérieur
		38 %	30 %
		Ensemble	29 %
		32 %	
Proportion d'adultes qui fréquentent l'université ou le collège selon les groupes d'âge		Groupes	
		d'âge	Pourcentage (oct. 2005)
		25-34	9,5 %
		35-44	3,5 %
		45-54	1,6 %
		55-64	0,6 %
		Ensemble	3,9 %

Nombreux sont les Canadiens cependant dont les compétences ne permettent pas de fonctionner dans une économie axée sur le savoir. D'après l'Enquête sur l'alphabétisation et les compétences des adultes (EACA) de 2003, 42 % des Canadiens en âge de travailler n'atteignent pas le niveau de littératie constituant le minimum requis pour l'économie et la société d'aujourd'hui¹⁵. Cette proportion n'a pas changé depuis 1994¹⁶. Un facteur clé de maintien de la prospérité canadienne sera l'accroissement des compétences de tous les Canadiens.

RHDSC aide ceux-ci à accéder aux possibilités d'apprentissage pouvant leur permettre d'être plus présents dans une économie et une société du savoir. Il suscite une culture de l'apprentissage continu en sensibilisant mieux les gens à l'importance de cet apprentissage et à la nécessité d'épargner pour les études postsecondaires, en facilitant l'accès des étudiants à ce palier du système éducatif et aux possibilités d'apprentissage des adultes, en collaborant avec les gouvernements provinciaux et territoriaux et les autres grands intervenants à l'exécution de programmes et de services en matière d'apprentissage et enfin en renforçant les capacités des principaux organismes de soutien des apprenants.

Dans le cadre de ce mandat, il gère une initiative horizontale appelée Programme canadien de prêts aux étudiants¹⁷. Il a conclu des ententes avec quatre fondations¹⁸, dont trois (notamment la Fondation canadienne des bourses d'études du millénaire) ont reçu un financement unique par le passé; la dernière, soit la Winnipeg Foundation, a eu droit jusqu'au 30 septembre 2006 à un financement annuel de contrepartie.

¹⁵ Enquête sur l'alphabétisation et les compétences des adultes, 2003. Composer l'adresse <http://nces.ed.gov/surveys/ail/>.

¹⁶ Enquête internationale sur l'alphabétisation des adultes, 1994. Composer l'adresse <http://www.statcan.ca/indicators/ind5002ca10189-588-XIF>.

¹⁷ Initiatives horizontales. Composer l'adresse http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_f.asp.

¹⁸ Fondations. Composer l'adresse http://www.tbs-sct.gc.ca/est-pre/20062007/p3a_f.asp.

COMPÉTENCES EN MILIEU DE TRAVAIL : RESSOURCES FINANCIÈRES ET HUMAINES – DÉPENSES PRÉVUES

Ressources financières et humaines			
Dépenses prévues			
Ressources financières (en millions de dollars)			
2006-2007	2007-2008	2008-2009	
102,9	102,5	80,1	Dépenses de fonctionnement brutes
116,4	191,3	153,9	Subventions et contributions non législatives
Total			234,0
Ressources humaines			
908	896	784	Équivalents temps plein

Ressources financières			
Ressources financières (en millions de dollars)			
2006-2007	2007-2008	2008-2009	
127,3	192,6	146,0	Partenariats en milieu de travail
22,6	30,5	26,9	Travailleurs étrangers et immigrants
33,6	33,9	34,7	Compétences et information sur le marché du travail
29,6	30,5	23,6	Répartition des services ministériels ³
6,2	6,3	2,8	Autres
Total ^b			234,0
Ressources humaines			
908	896	784	Équivalents temps plein

^a La portion des services ministériels liés au bureau du Ministre, au bureau du Sous-Ministre, au bureau du Contrôleur et des Services partagés a été divisée entre chaque résultat stratégique.

^b Ce montant inclut 53,1 millions de dollars (695 ETP) en 2006-2007, 52,6 millions de dollars (691 ETP) en 2007-2008 et 50,7 millions de dollars (694 ETP) en 2008-2009, pour l'exécution des programmes et des services par Service Canada. Pour de plus amples renseignements au sujet des opérations de Service Canada, s'il-vous-plait voir le résultat stratégique suivant "Améliorer les résultats des Canadiens grâce à l'excellence du service".

Activité de programmes Compétences en milieu de travail – Modifications de l'Architecture des activités de programmes 2005-2006 :

- L'ancienne sous-activité Partenariats en ressources humaines devient Partenariats en milieu de travail.
- L'activité Classification nationale des professions passe de Partenariats en ressources humaines (maintenant Partenariats en milieu de travail) à Information sur les compétences et le marché du travail.
- L'Initiative des compétences en milieu de travail et le Groupe de partenaires du milieu de travail sont de nouveaux programmes qui se situent au niveau des sous-activités relevant de Partenariats en milieu de travail.
- Programme des travailleurs étrangers passe à la nouvelle activité Travailleurs étrangers et immigrants.
- Portail Immigration et Mobilité interprovinciale de la main-d'œuvre sont de nouveaux programmes subordonnés à la sous-activité Travailleurs étrangers et immigrants.

Information sur les marchés du travail (IMT) : Ce programme élabore des politiques et contribue à améliorer l'information sur les compétences et le marché du travail et à assurer l'homogénéité des contenus, des produits et des services en question à l'échelle du pays. Par l'intermédiaire de Service Canada, il renseigne aussi sur les tendances nationales et régionales de l'emploi, les perspectives d'emploi sur le plan local, les salariales, les compétences et la formation exigées dans les diverses professions et les possibilités d'emploi et de formation. Service Canada offre aussi des services d'annonce, de recherche, d'avertissement et d'appariement d'emploi aux demandeurs et aux employeurs.

Composer les adresses

<http://www.rhdcc.gc.ca/fr/passeelles/nav/nav haut/programme/imt.shtml>;
<http://www.quicheemploi.gc.ca/> ;
<http://www.labourmarketinformation.ca>.

Travailleurs étrangers et immigrants : Ce programme aide les gens formés à l'étranger à bien intégrer au marché du travail canadien, et il améliore la mobilité interprovinciale des travailleurs formés à l'étranger ou au pays. Ce travail se fait en collaboration avec les partenaires et les intervenants provinciaux et territoriaux de tout le pays, ce qui comprend les autres ministères fédéraux, l'industrie et les organismes de réglementation. Ce sont des activités qui se répartissent entre quatre programmes ou secteurs.

Reconnaissance des titres de compétence étrangers : Ce programme favorise les activités d'acquisition de connaissances et de réalisation de projets qui sont proposées par les conseils sectoriels, les groupes de l'industrie, les organismes de réglementation, les provinces et territoires et les établissements d'enseignement qui s'occupent des questions d'évaluation et de reconnaissance des titres de compétence étrangers. Composer l'adresse

<http://www.rhdcc.gc.ca/asp/passereille.asp?hr=fr/cml/programmes/prce/index.shtml&hs=hzp>

Portail immigration : Ce programme enrichit le site Web *Se rendre au Canada* et il offre aux candidats à l'immigration, aux étudiants, aux travailleurs et aux nouveaux venus des renseignements, des services et des outils qui les aideront à prendre une décision éclairée s'ils veulent venir au Canada et qui faciliteront leur intégration au marché du travail et à la société. Composer l'adresse

<http://www.directioncanada.gc.ca/>

Programme des travailleurs étrangers : Ce programme aide les employeurs canadiens à combler leurs besoins en ressources humaines en facilitant l'entrée de travailleurs étrangers temporaires dans les secteurs du marché du travail où des pénuries professionnelles sont manifestes, tout en tenant compte des efforts des employeurs en vue de recruter et d'embaucher des Canadiens. Composer l'adresse

http://www.rhdcc.gc.ca/fr/passereilles/nav/nav_haut/programme/te.shtml

Mobilité interprovinciale de la main-d'œuvre : Ce programme coordonne les activités fédérales en vue d'améliorer la mobilité interprovinciale de la main-d'œuvre dans le cadre de l'Accord sur le commerce intérieur, de sorte que les travailleurs qui se qualifient dans une province ou un territoire puissent aussi faire reconnaître leurs compétences ailleurs au pays.

Information sur les compétences et le marché du travail (ICMT) : Le programme ICMT aide les demandeurs d'emploi (qui ont déjà un emploi ou se trouvent en chômage), les personnes devant faire un choix de carrière, les orienteurs professionnels, les fournisseurs de services d'emploi, les employeurs, les établissements de formation-apprentissage et les organismes de développement communautaire à prendre des décisions éclairées en matière de compétences, de ressources humaines et d'emploi. Ce programme, avec les produits et services qui s'y rattachent, contribue au bon fonctionnement du milieu de travail. Il comprend trois grands secteurs d'activité.

Classification nationale des professions (CNP) : La CNP est une nomenclature normalisée qui décrit les fonctions qu'exercent les Canadiens sur le marché du travail. Elle fait autorité au Canada en ce qui concerne l'information relative aux professions. Elle classifie et décrit 520 groupes de base et comprend plus de 30 000 titres professionnels. Composer l'adresse

http://www.dsc.gc.ca/fr/pdp/prh/cnp/cnp_index.shtml

Compétences essentielles : Ce sont les compétences au travail, à domicile et dans la société qui sont essentielles à l'acquisition de toutes les autres compétences, comme les compétences techniques liées à l'emploi, afin que les personnes puissent évoluer avec leur travail et s'adapter à l'évolution du milieu de travail et de la main-d'œuvre. L'initiative des compétences essentielles vise à relever le niveau de ces compétences chez les Canadiens qui entrent ou se trouvent déjà sur le marché du travail. Le point de départ est l'établissement de profils qui indiquent comment les compétences essentielles sont exploitées dans diverses professions avec leur degré de complexité. Ces profils présentent aussi des spécimens d'« outils de travail concrets ». Les partenariats formés avec les provinces et les territoires et les autres intervenants en milieu de travail contribuent à enrichir les compétences à la base des compétences essentielles, à promouvoir la compréhension et l'utilisation de ces compétences en milieu de travail et à créer des outils et autres ressources qui faciliteront leur intégration au milieu de travail.

Composer l'adresse

http://www.rhdcc.gc.ca/fr/pdp/prh/competences_essentielles/index.shtml

COMPÉTENCES EN MILIEU DE TRAVAIL : PROGRAMMES CONTRIBUANT À LA RÉALISATION DES PRIORITÉS

L'activité de programmes Compétences en milieu de travail favorise la collaboration des partenaires de l'industrie et des intervenants en vue de déterminer et de faire valoir les problèmes relatifs à l'acquisition l'industrie et des intervenants en vue de déterminer et de faire valoir les problèmes relatifs à l'acquisition canadiens sur un marché du travail en évolution rapide. Cette activité de programmes élabore et diffuse également de l'information et des connaissances qui sont essentielles au bon fonctionnement du marché du travail.

Partenariats en ressources humaines : Les Partenariats en ressources humaines sont des partenariats établis avec l'industrie et le réseau de l'apprentissage afin que les Canadiens aient les compétences et les connaissances requises en milieu de travail. Il y a six grands programmes ou secteurs d'activité.

Le programme *Conseils sectoriels* sert à subventionner les activités d'acquisition de connaissances et d'exécution de projets que proposent les secteurs sectoriels, ainsi que les organismes sectoriels spéciaux qui, au niveau national, s'occupent des questions de compétences et d'apprentissage. Composer l'adresse http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/ips.shtml

Métiers et apprentissage : La Direction continuera à appliquer la stratégie relative aux métiers et à l'apprentissage et à travailler avec Service Canada à la mise en œuvre de la Subvention aux apprentis.

Elle poursuivra aussi son travail avec les provinces et les territoires par l'intermédiaire du Conseil canadien des directeurs de l'apprentissage (CCDA) en vue de faciliter et d'accroître la mobilité professionnelle des travailleurs des métiers spécialisés; elle continuera à travailler avec les partenaires et les intervenants des secteurs public et privé au renforcement des systèmes d'apprentissage au Canada, pour mieux répondre aux exigences de l'économie du savoir. Composer l'adresse http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/imammo.shtml

Programme interprovincial du Sceau rouge : Le Programme du Sceau rouge vise à faciliter la mobilité par un régime interprovincial d'agrément reposant sur des normes professionnelles et des examens nationaux pour 45 métiers. Il encourage en outre la normalisation des programmes provinciaux et territoriaux de formation et d'agrément en apprentissage. Les apprentis qui ont achevé leur formation et qui sont devenus des compagnons agréés peuvent faire apposer le *Sceau rouge* sur leur certificat de reconnaissance au terme de leur apprentissage en réussissant à l'examen interprovincial. Composer l'adresse http://www.sceau-rouge.ca/Site/index_f.htm

Fonds d'infrastructure des programmes de formation (FIPF) : Le FIPF est un projet pilote sur trois ans qui, par des fonds fédéraux, favorise les investissements des syndicats et des employeurs pour l'acquisition de matériel moderne pour les centres de formation patronaux-syndicaux. Composer l'adresse <http://www.rhdcc.gc.ca/fr/pip/prh/ficf/index.shtml>

Initiative des compétences en milieu de travail (ICMT) : L'ICMT soutient des projets en collaboration pour la mise à l'essai et l'évaluation de stratégies novatrices et axées sur les résultats en matière de développement des compétences chez les Canadiens ayant un emploi. Ce programme s'adresse à l'ensemble des intervenants en milieu de travail. Composer l'adresse <http://www.rhdcc.gc.ca/fr/cmt/initiatives/cmt/index.shtml>

Groupe de partenaires du milieu de travail (GPMT) : Le GPMT établit pour l'industrie et le gouvernement canadiens une tribune d'échange de points de vue et de renseignements et une capacité de recherche sur les questions de compétences en milieu de travail. Il est appelé à faire progresser l'industrie, les partenaires du domaine de l'éducation et les gouvernements dans la voie de l'intégration du milieu de travail au système d'apprentissage.

Productivité et participation canadiennes accrues par des marchés du travail efficaces et inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage

ACTIVITÉ DE PROGRAMMES : COMPÉTENCES EN MILIEU DE TRAVAIL

- Exposer une stratégie intégrée des compétences en milieu de travail en travaillant avec les provinces, les territoires, les principaux ministères et les grands intervenants pour faire avancer de multiples activités, comme l'enseignement des métiers, la formation-apprentissage, la reconnaissance des titres de compétence étrangers, l'information sur le marché du travail et les initiatives sectorielles.

- Meilleure compréhension de l'apprentissage et des besoins en milieu de travail chez tous les intervenants.
- Utilisation accrue des compétences existantes sur le marché du travail.
- Harmonisation pancanadienne des modes et des exigences de reconnaissance des compétences.
- Engagement accru des intervenants en matière d'apprentissage en milieu de travail.

Résultat
stratégique

Priorités
2006-2007

Résultats
prévus de
l'activité de
programmes

Indicateurs
de
programme

- Nombre de nouveaux apprentis inscrits à un programme d'apprentissage.
- Augmentation du nombre de gens de métier qui sont tout à fait mobiles sur le territoire canadien grâce au programme du sceau rouge.
- Nombre d'outils et de procédés mis en place en vue de la vérification et de la reconnaissance des titres de compétence et de l'expérience acquis par les professionnels formés à l'étranger.

Programmes

- Programme des conseils sectoriels
- Métiers et apprentissage
- Normes interprovinciales du Programme du Sceau rouge
- Fonds d'infrastructure des centres de formation
- Initiative des compétences en milieu de travail
- Groupe de partenaires du milieu de travail
- Portail immigration
- Programme des travailleurs étrangers
- Mobilité interprovinciale de la main-d'œuvre
- Information sur les compétences et le marché du travail
- Classification nationale des professions
- Compétences essentielles
- Information sur les marchés du travail

Ressources

DÉPENSES PRÉVUES : 219,3 millions

ETP : 908

Une stratégie des compétences en milieu de travail doit contribuer à l'atteinte de résultats positifs grâce à des programmes et à des services comme ceux des initiatives sectorielles, de l'apprentissage et des métiers spécialisés (subvention d'encouragement, par exemple, aux apprentis de la main-d'œuvre, de la reconnaissance et de l'utilisation des titres de compétence acquis à l'étranger, des compétences essentielles et de l'élaboration, de la diffusion et de la coordination de l'information sur les compétences et le marché du travail et d'activités connexes.

COMPÉTENCES EN MILIEU DE TRAVAIL : PRIORITÉS ET PLANS

Priorité : Exposer une stratégie intégrée des compétences en milieu de travail en travaillant avec les provinces, les territoires, les principaux ministères et les grands intervenants pour faire avancer de multiples activités, comme l'enseignement des métiers, la formation-apprentissage, la reconnaissance des titres de compétence étrangers, l'information sur le marché du travail et les initiatives sectorielles.

Plans :

- Développer et renforcer les initiatives relatives à la reconnaissance des titres de compétence étrangers, ce qui comprend la future Agence canadienne d'évaluation et de reconnaissance des titres de compétence étrangers.
- Appliquer la Stratégie des métiers et de l'apprentissage, ce qui comprend la Subvention aux apprentis.
- Continuer à travailler avec les provinces et les territoires à l'accroissement de la mobilité interprovinciale de la main-d'œuvre dans le cadre de l'*Accord sur le commerce intérieur*.
- Développer et renforcer l'initiative des compétences essentielles et de l'alphabetisation en milieu de travail.
- Améliorer et élargir l'incidence du Programme des conseils sectoriels et mettre à l'essai des modes nouveaux ou novateurs de développement sectoriel des compétences.
- Prendre les premières mesures d'élaboration de normes communes de programme pédagogique de base pour les métiers du Sceau rouge, en vue d'accroître la mobilité professionnelle des apprentis au Canada.
- Par l'intermédiaire du Groupe de travail sur l'information sur le marché du travail du Forum des ministres du marché du travail, continuer à travailler aux questions d'intérêt commun pour que le Canada dispose d'une main-d'œuvre de qualité.

Activité de programmes Marché du travail : modifications de l'Architecture des activités de programmes 2005-2006 :

- Les anciennes activités de programmes Assurance-emploi et Programmes d'emploi sont devenues des sous-activités subordonnées à la nouvelle activité de programmes Marché du travail.
- Les Programmes d'emploi sont devenus Programmes du marché du travail.
- L'ancienne activité Traitement des demandes a été subordonnée à l'activité Traitement, sous l'activité de programmes Intégrité et sous le résultat stratégique Service Canada.
- Les anciennes sous-activités Recouvrement des cotisations d'assurance-emploi, Appels, Enquête et contrôle et Gestion de programmes, qui faisaient partie de Gestion du programme et amélioration des services, ont été subordonnées à une catégorie résiduelle Autres – Marché du travail.
- Amélioration des services, qui faisait auparavant partie de la sous-activité Gestion du programme et amélioration des services, a été subordonnée à l'activité de programmes Services transparents axés sur le citoyen sous le résultat stratégique Service Canada.

ACTIVITÉ DE PROGRAMMES : COMPÉTENCES EN MILIEU DE TRAVAIL

Il est essentiel de rendre le milieu de travail canadien plus concurrentiel si on entend garantir la productivité du Canada et améliorer la qualité de vie. Avec des travailleurs qualifiés, on peut mieux accroître la productivité, ceux-ci étant plus capables de traiter l'information, d'accomplir leurs tâches avec efficacité et efficacité, de s'adapter à la nouvelle technologie et de l'exploiter. Ils sont aussi plus en mesure d'innover dans l'information, les produits, les services et les procédés de production et de distribution.

Pour que nous puissions obtenir un tel résultat stratégique, nous devons absolument adopter une stratégie d'intégration des compétences en milieu de travail. Cette stratégie doit avoir pour moteur la demande des entreprises et réunir une grande diversité de programmes, de services et de partenaires – les provinces, les employeurs et les syndicats – pour que soit trouvées des solutions novatrices aux problèmes de compétences.

Le développement des compétences en milieu de travail, qui vise avant tout les employeurs, les salariés et les immigrants, comporte plusieurs grands objectifs qui, au Canada, font partie intégrante du grand programme et de l'union économiques : souplesse et rendement du marché du travail; compétences, adaptabilité et durabilité de la main-d'œuvre; programmes et services qui correspondent et répondent aux besoins de main-d'œuvre qualifiée des employeurs.

Indicateurs de résultats stratégiques			
INDICATEURS			
Pourcentage de la population active d'âge adulte qui a reçu une formation structurée liée à l'emploi.	2002	34,7 %	Pourcentage de la population active d'âge adulte qui a reçu une formation liée à l'emploi.
Pourcentage de la population active d'âge adulte qui a reçu une formation liée à l'emploi.	2002	25,0 %	Revenu moyen des immigrants récents qui sont diplômés d'université en proportion du revenu de leurs homologues nés au Canada.
	2000	65,0 %	

Ressources financières détaillées par programmes ou service

Ressources financières (en millions de dollars)

Assurance-emploi	2006-2007	2007-2008	2008-2009
Prestations	12 442,0	13 058,0	13 661,0
Répartition des services ministériels ^a	269,4	277,5	281,6
Autres ^b	658,4	650,0	644,4
Total partiel	13 369,8	13 985,5	14 587,0

Programmes du marché du travail	2006-2007	2007-2008	2008-2009
Prestations d'emploi et mesures de soutien	1 353,8	1 350,1	1 350,6
Transferts en vertu des ententes de développement du marché du travail	987,0	987,0	987,0
Stratégie de développement des ressources humaines autochtones	271,3	264,4	263,5
Partenariats pour les compétences et l'emploi des autochtones	30,3	21,1	-
Stratégie emploi jeunesse	321,1	321,4	321,4
Adaptation au marché du travail	11,2	11,2	11,2
Communautés minoritaires de langue officielle	13,6	13,5	-
Répartition des services ministériels ^a	131,2	136,2	136,8
Autres ^c	15,2	15,3	15,3
Total partiel	3 134,7	3 120,2	3 085,8
Total ^d	16 504,5	17 105,7	17 672,8

Equivalents temps plein

^a La portion des services ministériels liés au bureau du Ministre, au bureau du Sous-Ministre, au bureau du Contrôleur et des Services partagés a été divisée entre chaque Résultat stratégique.

^b Cette catégorie inclut des ressources liées au traitement des demandes d'assurance emploi, à la perception des cotisations d'assurance-emploi, aux appels, aux enquêtes et contrôle, et à la gestion des programmes et à l'amélioration des services.

^c La catégorie "Autres" présente des ressources qui ne sont pas liées directement aux sous-activités recensées ci-haut.

^d Ce montant inclut 1 259,9 millions de dollars (ETP 13 240) en 2006-2007, 1 246,2 millions de dollars (13 138 ETP) en 2007-2008 et 1 252,7 millions de dollars (13 086 ETP) en 2008-2009, pour l'exécution des programmes et des services par Service Canada. Pour de plus amples renseignements au sujet des opérations de Service Canada, s'il-vous-plait voir le résultat stratégique suivant "Améliorer les résultats des Canadiens grâce à l'excellence du service".

Partenariats pour les compétences et l'emploi des Autochtones (PCEA) : Ce complément à la SDRHA est un programme qui, sous une direction nationale, vise à favoriser la collaboration entre les groupes autochtones, le secteur privé et les gouvernements provinciaux et territoriaux. Il a pour objet d'assurer des emplois viables aux Autochtones dans l'exploitation d'importantes possibilités économiques se traduisant par des avantages à long terme pour les collectivités, les familles et les personnes d'appartenance autochtone. Composer l'adresse http://www17.hrdc-dhrc.gc.ca/AHRD/Internet/genera/public/asep/asep_f.asp

Stratégie emploi jeunesse (SEJ) : Les programmes relevant de la SEJ servent à bien préparer les jeunes Canadiens à prendre leur place sur un marché du travail en évolution et à y réussir. Cette stratégie est mise en application de concert avec le secteur privé et des organisations non gouvernementales grâce aux efforts collectifs de 13 ministères, organismes et sociétés du palier fédéral. RHDSC dirige cette initiative conjointement avec Service Canada. Les mesures relevant de la SEJ visent les jeunes de 15 à 30 ans en situation de chômage ou de sous-emploi. C'est une stratégie nationale qui prévoit un large éventail d'initiatives dans le cadre de trois programmes : Connexion compétences, Expérience emploi été et Objectif carrière. Composer l'adresse <http://www.jeunesse.gc.ca/>.

Les activités d'*Adaptation au marché du travail* visent la réalisation des objectifs d'intégration du système du marché du travail. Elles sont aussi là pour garantir que les bons outils seront en place en fonction des besoins d'un marché du travail polyvalent et en expansion.

Communautés minoritaires de langue officielle : RHDSC veille à la vitalité des communautés minoritaires de langue officielle grâce à une initiative horizontale qui sert à orienter les politiques et prévoit des analyses à l'échelle des programmes. Le but est d'améliorer le développement des ressources humaines, l'employabilité et l'acquisition de capacités dans les communautés minoritaires de langue officielle. Le Ministère a établi six grandes priorités dans le cadre du Plan d'action pour les langues officielles du gouvernement du Canada : Alphabétisation, Jeunes stagiaires, Fonds d'habilitation ou d'appui, Intégration des immigrants d'expression française au marché du travail canadien, Projets pilotes de garde des enfants et Organisations non gouvernementales. Composer l'adresse http://www.rhdcc.gc.ca/fr/passezelles/nav/nav_haut/programme/scmlc.shtml

MARCHE DU TRAVAIL : RESSOURCES FINANCIÈRES ET HUMAINES – DÉPENSES PRÉVUES

Ressources financières et humaines			
Dépenses prévues			
Ressources financières (en millions de \$)			
2006-2007	2007-2008	2008-2009	
Dépenses de fonctionnement brutes	1 324,2	1 322,4	1 320,9
Subventions et contributions non législatives	552,3	536,6	504,4
Pailements de transferts législatifs	0,2	0,2	0,2
Total des dépenses brutes	1 876,7	1 859,2	1 825,5
Assurance-emploi (Partie I) - Prestations de revenu	12 442,0	13 058,0	13 661,0
Assurance-emploi (Partie II) - Prestations d'emploi et mesures de soutien	2 137,5	2 143,1	2 143,6
Pailements des rentes sur l'État et du régime d'assurance de la fonction publique	48,3	45,4	42,7
Total	16 504,5	17 105,7	17 672,8
Ressources humaines			
Equivalents temps plein	13 377	13 310	13 289

MARCHÉ DU TRAVAIL : PROGRAMMES CONTRIBUANT À LA RÉALISATION DES PRIORITÉS

L'activité de programmes Marché du travail comprend les programmes et les services

d'assurance-emploi et d'emploi.

L'assurance-emploi favorise le bien-être individuel et la stabilité économique et facilite la transition sur le marché du travail en procurant une aide financière temporaire aux chômeurs admissibles pendant qu'ils cherchent du travail ou améliorent leurs compétences. Les personnes qui doivent s'absenter du travail pour cause de maladie, en raison d'une grossesse ou pour s'occuper d'un nouveau-né ou d'un enfant adopté, de même que celles qui doivent prodiguer des soins à un membre de leur famille qui est gravement malade et qui risque fortement de mourir, peuvent aussi bénéficier de l'assurance-emploi. Les chômeurs ont droit aux mesures de soutien temporaire de leur revenu selon la Partie I de la Loi sur l'assurance-emploi.

Les programmes et services d'emploi permettent aux Canadiens, notamment aux adultes en chômage et aux groupes qui se heurtent à des obstacles à l'emploi comme les jeunes, les travailleurs âgés ayant perdu leur emploi et les Autochtones, d'acquies des compétences, de maintenir ou d'améliorer leur emploi et leur revenu et de mieux s'adapter à l'évolution du marché du travail. Ce sont des programmes et des services qui renforcent l'activité des Canadiens sur un marché du travail dynamique. Ils sont financés par le Trésor et grâce aux dispositions de la partie II de la Loi sur l'assurance-emploi.

Prestations de revenu du Régime d'assurance-emploi : Ce programme procure une aide financière temporaire aux personnes sans emploi (y compris les pêcheurs indépendants) pendant qu'elles cherchent du travail ou qu'elles partagent un emploi, ainsi qu'aux personnes qui doivent s'absenter temporairement du travail pour cause de maladie, en raison d'une grossesse et de la naissance d'un enfant, pour s'occuper d'un nouveau-né ou d'un enfant adopté, ou pour prodiguer des soins à un membre de leur famille gravement malade qui risque fortement de mourir. Par une entente conclue avec le gouvernement canadien en janvier 2006, la province de Québec verse ses propres prestations de maternité et d'assurance parentale à sa population plutôt que par le Régime d'assurance-emploi.

Prestations d'emploi et mesures de soutien (PEMS) et Ententes sur le développement du marché du travail (EDMT) : La partie II de la Loi sur l'assurance-emploi autorise l'élaboration et l'exécution de PEMS qui aident les participants en chômage à se préparer à l'emploi, à trouver du travail et à le garder. Composer l'adresse http://www.rhdcc.gc.ca/fr/passerelles/nav/nav_haut/programme/sc.shtml

Dans le cadre de la Loi sur l'assurance-emploi, des EDMT ont été conclues avec l'ensemble des provinces et des territoires. Une entente récemment conclue avec l'Ontario entrera en vigueur le 1^{er} janvier 2007. Huit de ces accords ont pris la forme d'une entente de transfert selon laquelle six provinces et deux territoires ont pris en charge l'élaboration et la mise en œuvre de programmes et de services provinciaux et territoriaux analogues aux PEMS. RHDSC et Service Canada conçoivent et appliquent les PEMS conjointement avec quatre provinces et un territoire en vertu d'EDMT cogérées. Des programmes pancanadiens gérés par RHDSC visent la prise en charge, dans les dossiers relatifs au marché du travail, de questions et de priorités qui sont de portée nationale ou multirégionale. Composer l'adresse : <http://www.rhdcc.gc.ca/fr/dgpe/dis/cia/subventions/pems/article63.shtml>

Stratégie de développement des ressources humaines autochtones (SDRHA) : La SDRHA a pour objet d'aider les Autochtones à se préparer au marché du travail, à obtenir un emploi et à le conserver, ainsi qu'à renforcer leurs capacités en matière de développement des ressources humaines. Elle s'applique par 80 ententes correspondantes avec les intéressés partout au pays. On y retrouve en majeure partie les programmes que destine RHDSC aux Autochtones. Composer l'adresse http://www17.hrdc-drrhc.gc.ca/AHRDSDInternet/generel/public/HomePage1_f.asp

ACTIVITÉ DE PROGRAMMES : MARCHÉ DU TRAVAIL

Priorités
2006-2007

- Travailler avec les provinces, les territoires et les intervenants et veiller à ce que les programmes du marché du travail soient cohérents, complets et souples.
- Donner des conseils sur le soutien du revenu offert par l'assurance-emploi pour veiller à ce qu'il demeure bien adapté aux besoins de l'économie et de la main-d'œuvre du pays.
- Créer plus de partenariats efficaces pour améliorer les résultats des Autochtones sur le marché du travail.
- Elaborer des approches de réduction des obstacles et aider des Canadiens vulnérables, comme les jeunes à risque, les personnes handicapées et les travailleurs âgés, à participer au marché du travail.

Résultats
prévus de
l'activité de
programmes

- Les Canadiens en chômage admissibles selon les critères de la Loi sur l'assurance-emploi sont appuyés pendant qu'ils cherchent du travail, ce qui vient favoriser des transitions harmonieuses et fécondes vers le marché du travail.
- Les gens sont en mesure de concilier leurs responsabilités professionnelles et familiales.
- Il se crée une main-d'œuvre souple et adaptable qui opère sans heurt les transitions entre l'école et le travail et entre le chômage et le réemploi.
- On atténue les difficultés que crée l'évolution du marché du travail en adoptant de nouvelles stratégies (travailleurs âgés, etc.).
- Les employeurs sont capables de trouver des travailleurs qualifiés et, de ce fait, d'améliorer leur productivité et leur compétitivité.
- Il existe une collaboration efficace avec les partenaires du marché du travail.

Indicateurs de
programme

- Pourcentage de chômeurs admissibles aux prestations ordinaires du Régime d'assurance-emploi (en autodéclaration) et des travailleurs âgés aux prestations d'emploi et mesures de soutien (PEMS).
- Proportion des droits à prestations ordinaires exercés par les prestataires du Régime d'assurance-emploi.
- Proportion des droits à prestations de maternité ou de congé parental exercés par les prestataires du Régime d'assurance-emploi.
- Nombre de jeunes qui retournent aux études ou trouvent un emploi après une intervention de programme d'emploi dans le cadre de la Stratégie emploi jeunesse et proportion du nombre total de plans d'action menés à bien que représentent ces clients.
- Nombre d'Autochtones qui retournent aux études ou trouvent un emploi après une intervention de programme d'emploi dans le cadre de la Stratégie de développement des ressources humaines autochtones et proportion du nombre total de plans d'action menés à bien que représentent ces clients.
- Nombre de clients devenus salariés ou travailleurs indépendants après une intervention de programme d'emploi et proportion du nombre total de plans d'action menés à bien que représentent ces clients.

Programmes

- Prestations de revenu du Régime d'assurance-emploi
- Prestations d'emploi et mesures de soutien
- Ententes de développement du marché du travail
- Stratégie de développement des ressources humaines autochtones
- Partenariats pour les compétences et l'emploi des Autochtones
- Stratégie emploi jeunesse
- Adaptation au marché du travail
- Communautés minoritaires de langue officielle

Ressources

DÉPENSES PRÉVUES : 16 504,5 M\$

: 13 377

Priorité : Donner des conseils sur le soutien du revenu offert par l'assurance-emploi pour veiller à ce qu'il demeure bien adapté aux besoins de l'économie et de la main-d'œuvre du pays.

- Plans :**
- Surveiller et jauger les effets sur le marché du travail des projets pilotes de l'assurance-emploi dans les régions de fort chômage de manière à éclairer les décisions relatives au régime.
 - Faire une évaluation en bonne et due forme des prestations de compassion (instituées en janvier 2004) du Régime d'assurance-emploi et évaluer les possibilités de modifier les règles applicables à ces prestations.
 - Poursuivre l'examen des régions économiques de l'assurance-emploi servant à établir le droit à des prestations et les périodes de prestations, selon les nouvelles données géographiques de Statistique Canada
 - Surveiller et évaluer les nouvelles dispositions législatives établissant le taux de l'a.-e. afin d'atteindre les objectifs escomptés.

Priorité : Créer plus de partenariats efficaces pour améliorer les résultats des Autochtones sur le marché du travail.

- Plans :**
- Renforcer et soutenir l'application de la Stratégie de développement des ressources humaines autochtones et les ententes de développement correspondantes dans tout le pays.
 - Favoriser la multiplication des partenariats avec le secteur privé (le programme de partenariats pour les compétences et l'emploi des Autochtones, par exemple), en vue de favoriser l'accès des peuples autochtones à l'emploi durable.
 - Collaborer avec les autres ministères à l'examen des possibilités relatives au développement de la petite enfance chez les Autochtones et recommander l'établissement d'un guichet unique, tout en subventionnant de bons programmes de garde des enfants dans les réserves et dans le Nord.
 - Travailler avec les partenaires autochtones, les provinces, les territoires et les autres intervenants à une stratégie nouvelle assortie de solutions pratiques en vue de combattre la pauvreté et de réduire l'écart entre les Autochtones et les autres Canadiens en matière d'emploi.

Priorité : Élaborer des approches de réduction des obstacles et aider les Canadiens vulnérables, comme les jeunes à risque, les personnes handicapées et les travailleurs âgés, à participer au marché du travail.

- Plans :**
- En consultation avec les partenaires, procéder à l'examen des programmes d'emploi jeunesse pour s'assurer qu'ils conviennent au marché du travail actuel et aux besoins des jeunes à l'échelle nationale, régionale et locale.
 - Accroître l'efficacité au sein du gouvernement canadien en ce qui concerne la Stratégie d'emploi jeunesse et dans l'ensemble des gouvernements et des organisations non gouvernementales pour l'élaboration de programmes pour les jeunes.
 - Adapter les programmes en vigueur à la conjoncture particulière du marché du travail du Nord en mettant l'accent sur les jeunes.
 - Avec les autres paliers de gouvernement et les organisations non gouvernementales, combattre la violence urbaine dans le cas des jeunes à risque au moyen des programmes d'emploi.
 - Élaborer et mettre en œuvre une initiative visant à répondre aux besoins d'emploi à court terme des travailleurs âgés ayant perdu leur emploi, et entreprendre du même coup une étude de faisabilité en vue d'évaluer un train de mesures à l'intention de ces travailleurs en vue d'élaborer une stratégie à long terme.

Grâce aux ententes sur le développement du marché du travail conclues avec les provinces et les territoires, les programmes et les services d'emploi permettent aux Canadiens de se préparer à l'emploi, de trouver un emploi et de le garder. Des stratégies où sont ciblés les Autochtones et les jeunes complètent le programme d'assurance-emploi. Le Ministère adaptera ces programmes et ces politiques pour qu'ils conviennent constamment aux besoins de la main-d'œuvre.

RHDSC continue à surveiller et à évaluer ses programmes et ses politiques en mettant l'accent sur le lien à établir entre cette évaluation et une meilleure mesure du rendement, une gestion axée sur les résultats et, en fin de compte, l'amélioration des résultats obtenus par les Canadiens.

RHDSC gère quatre initiatives horizontales¹⁴ : Stratégie de développement des ressources humaines autochtones, Programme de partenariats pour les compétences et l'emploi des Autochtones, Stratégie emploi jeunesse et Ententes sur le développement du marché du travail. Les partenariats établis avec les provinces et les territoires, des groupes tiers représentatifs, les intervenants du marché du travail et le secteur privé sont essentiels à l'obtention des résultats recherchés.

En 2006-2007, il nous faudra veiller principalement à ce que les programmes d'emploi tiennent compte de la conjoncture et travailler de près et avec plus d'efficacité avec les provinces, les territoires, les groupes autochtones et les autres partenaires.

MARCHÉ DU TRAVAIL : PRIORITÉS ET PLANS

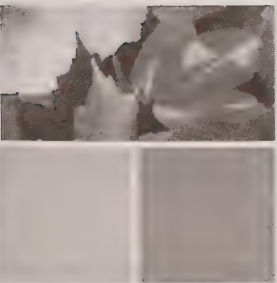
Priorité : Travailler avec les provinces, les territoires et les intervenants et veiller à ce que les programmes du marché du travail soient cohérents, complets et souples.

Plans :

- Continuer à préparer avec l'Ontario la cession des responsabilités pour la conception et l'exécution des prestations d'emploi et des mesures de soutien financées par le Régime d'assurance-emploi. Cette cession, qui prend effet le 1^{er} janvier 2007, est prévue par l'Entente Canada-Ontario sur le développement du marché du travail.
- Concevoir, évaluer et proposer des options relatives aux politiques des programmes pour que ceux-ci conservent leur utilité dans un marché du travail dynamique, et ce, après l'examen systématique des enseignements tirés des évaluations de programmes et d'autres sources.
- Resserrer les liens avec les programmes des compétences en milieu de travail pour un meilleur alignement sur la demande du marché du travail.
- Continuer à affermir les liens avec le programme des communautés minoritaires de langue officielle pour entretenir la vitalité des marchés locaux du travail.

¹⁴ On trouvera des détails sur ces initiatives horizontales à l'adresse : http://www.tbs-sct.gc.ca/rma/eppi-bdrp/hrdb-rhbd/profil_e.asp.

Résultat stratégique



PRODUCTIVITÉ ET PARTICIPATION CANADIENNES ACCRUES PAR DES MARCHÉ DU TRAVAIL EFFICIENTS ET INCLUSIFS, DES MILIEUX DE TRAVAIL COMPÉTITIFS ET L'ACCÈS À L'APPRENTISSAGE

Le vieillissement de la population active au Canada engendre des défis inévitables. La prospérité de notre pays aujourd'hui et demain tient à une croissance forte et soutenue de la productivité et à l'accroissement de l'activité. RHDSC dispose d'importants programmes essentiels à la double progression de la productivité et de l'activité dans les secteurs suivants : marché du travail, compétences en milieu de travail et apprentissage.

Le marché du travail exigera de plus en plus de travailleurs mieux scolarisés et qualifiés. Une main-d'œuvre hautement qualifiée est essentielle à l'accroissement de la productivité et au maintien d'une forte croissance économique. Les programmes de compétences en milieu de travail regroupent une grande diversité d'initiatives dictées par le pressant besoin de trouver des réponses novatrices aux problèmes de compétences. Les programmes d'apprentissage facilitent l'accès à l'éducation postsecondaire et à la formation professionnelle et sensibilisent à l'importance de l'apprentissage continu. Ensemble, les mesures prises dans ces secteurs d'activité visent à établir et à élargir la source nationale de compétences et à garantir la main-d'œuvre à long terme. En complément, il y a des initiatives qui, dans le cadre du programme Marché du travail, facilitent l'élimination des obstacles à l'emploi et garantissent que les taux d'activité (sur le marché du travail) seront optimaux aujourd'hui comme demain.

Voici une description des priorités et des plans qui intéressent les secteurs de programme Marché du travail, Compétences en milieu de travail et Apprentissage.

ACTIVITÉ DE PROGRAMMES : MARCHÉ DU TRAVAIL

Pour obtenir ce résultat stratégique, le Ministère continuera d'offrir un revenu d'appoint temporaire aux chômeurs admissibles afin de contribuer à la stabilité de l'économie, au bien-être des personnes et l'assouplissement du marché du travail pour qu'il s'adapte à l'évolution de la conjoncture économique.

Le Ministère cherche avec les provinces, les territoires et d'autres partenaires à favoriser l'atteinte des objectifs que sont une meilleure intégration systémique du marché du travail au Canada et la disponibilité des bons outils pour répondre aux besoins du marché du travail actuel. Il redoublera d'efforts dans des domaines comme la participation des Autochtones, les jeunes à risque, les travailleurs âgés ayant perdu leur emploi afin d'atteindre ses objectifs et de favoriser des gains d'efficacité sur le marché du travail afin que la quantité et la qualité de la main-d'œuvre répondent effectivement à la demande et afin d'assurer l'inclusivité de la population active par l'élimination des obstacles et l'amélioration des possibilités pour l'acquisition de compétences par les Canadiens.

RECHERCHE EN POLITIQUES ET COMMUNICATIONS : RESSOURCES FINANCIÈRES ET HUMAINES – DÉPENSES PRÉVUES

Ressources financières et humaines			
Dépenses prévues			
Ressources financières (en millions de \$)			
2006-2007	2007-2008	2008-2009	
Ancien RHDCC - Soutien aux politiques et aux programmes			
Dépenses de fonctionnement brutes	120,1	107,7	106,8
Ancien DSC - Politique de développement social et innovation			
Dépenses de fonctionnement brutes	67,3	70,7	70,7
Total			
187,4	178,4	177,5	
Ressources humaines			
Équivalents temps plein			
936	898	894	

Ressources financières détaillées par programmes ou service			
Ressources financières (en millions de dollars)			
2006-2007	2007-2008	2008-2009	
Ressources Humaines et Développement des Compétences Canada - Soutien aux politiques et aux programmes			
Politique stratégique et planification	43,7	42,0	41,9
Communications et services ministériels	44,5	37,1	37,1
Répartition des services ministériels ^a	37,1	33,9	33,8
Autres	(5,2)	(5,3)	(6,0)
Sous-total	120,1	107,7	106,8
Développement Social Canada - Politique de développement social et innovation			
Politique de développement social et innovation	61,7	65,4	65,4
Répartition des services ministériels ^a	5,6	5,3	5,3
Total partiel	67,3	70,7	70,7
Total			
187,4	178,4	177,5	
Ressources humaines			
Équivalents temps plein			
936	898	894	

^a La portion des services ministériels liés au bureau du Ministre, au bureau du Sous-Ministre, au bureau du Contrôleur et des Services partagés a été divisée entre chaque résultat stratégique.

RECHERCHE EN POLITIQUES ET COMMUNICATIONS : PRIORITÉS ET PLANS (suite)

Priorité : Accroître la participation et la collaboration de nos partenaires et des Canadiens par l'engagement public et d'autres activités pour améliorer et rendre novatrices et complémentaires les initiatives stratégiques.

Plans

- Appliquer une stratégie de mobilisation et un cadre de participation publique en vue d'orienter toutes les activités de RHDSC dans ce domaine, et ce, par la coordination et l'intégration à l'échelle tant interministérielle qu'intramministérielle.
- Continuer à soutenir et à renforcer les relations fédérales-provinciales-territoriales par des réunions, des consultations et des ententes de travail à caractère officiel de sorte que le gouvernement puisse mieux consolider l'union économique et continuer à soutenir l'union sociale.
- Donner des avis et créer des possibilités en politique stratégique pour contribuer à la réalisation des objectifs de développement socio-économique des Jeux olympiques et paralympiques de 2010, et ce, grâce à de bonnes relations de travail sur le plan horizontal.
- Continuer à soutenir les relations du gouvernement du Canada avec les organismes du secteur communautaire qui jouent un rôle de premier plan dans les services assurés aux Canadiens.

RECHERCHE EN POLITIQUES ET COMMUNICATIONS : PROGRAMMES CONTRIBUANT À LA RÉALISATION DES PRIORITÉS

L'activité de programme visant la recherche en politiques et communications assure un leadership stratégique en mettant l'accent sur les partenariats nationaux et internationaux qui favorisent l'élaboration de programmes et de politiques assortis de fonctions de vérification, d'évaluation et de recherche. Elle contribue aussi, par la planification et les communications, à la réalisation des objectifs stratégiques et opérationnels du Ministère.

Politique stratégique : Il s'agit avant tout pour le Ministère de relever les défis en matière de développement social et de capital humain qui se présentent aux Canadiens en trouvant des solutions stratégiques innovatrices. Pour donner suite aux engagements pris par le gouvernement dans ce domaine des ressources humaines et du développement social, le Ministère se dote de cadres et de stratégies de base sur le plan des politiques. Ces cadres et stratégies permettent aussi de reconnaître les enjeux nouveaux pour les Canadiens.

Savoir, analyse, vérification et évaluation : Les activités de gestion du savoir, de vérification et d'évaluation favorisent la reddition de comptes, l'adoption de politiques et de programmes innovateurs et répondant aux besoins et les décisions fondées sur des données probantes par les gouvernements, les organismes publics, les entreprises, les collectivités, les familles et les citoyens.

Affaires publiques et participation : Le Ministère organise des activités de mobilisation-participation en vue d'élaborer des politiques et des programmes améliorés en sollicitant les vues des Canadiens et en enrichissant le savoir et la recherche.

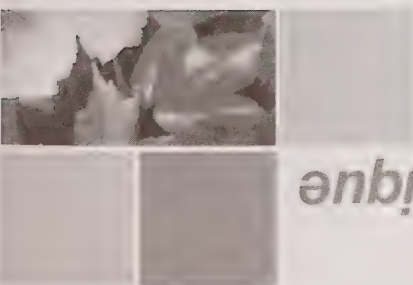
Ajoutons que RHDSC compte parmi les ministères fédéraux qui, avec le Secrétariat fédéral aux Jeux olympiques et paralympiques de 2010, les partenaires hôtes, les autres paliers de gouvernement et la société civile, font la promotion de ces activités et plus particulièrement de la participation des peuples autochtones aux Jeux et à ce qui les entoure.

RECHERCHE EN POLITIQUES ET COMMUNICATIONS : PRIORITÉS ET PLANS

<p>Priorité : Promouvoir les principales politiques de ressources humaines et de développement social du gouvernement du Canada.</p>	<p><i>Plans</i></p> <ul style="list-style-type: none"> • Élaborer des politiques favorisant les engagements gouvernementaux. • Entreprendre une étude de faisabilité en ce qui concerne les travailleurs âgés. • Engager des consultations sur l'éducation et la formation au palier postsecondaire pour aider à rétablir l'équilibre fiscal. • Élaborer une politique à long terme de développement du capital humain et de promotion sociale pour le XXI^e siècle. 	<p>Priorité : Élaborer et mettre en œuvre les principaux cadres et stratégies du Ministère.</p>	<p><i>Plans</i></p> <ul style="list-style-type: none"> • Élaborer une politique-cadre pour le nouveau Ministère en matière de capital humain et de développement social et dégager les priorités essentielles. • Concevoir et réaliser l'initiative panministérielle de gestion du savoir. • Élaborer un plan intégré des connaissances pour RHDSC, plus précisément une stratégie à moyen terme de création et de diffusion du savoir. • Élaborer un plan de données pour RHDSC, plus précisément une stratégie d'ensemble et coordonnée de planification d'information et d'enquête. • Renforcer les stratégies et prévoir un volet « évaluation » dans la démarche d'élaboration des politiques. 	<p>Priorité : Faire avancer l'acquisition de connaissances pour contribuer à une prise de décisions éclairées.</p>	<p><i>Plans</i></p> <ul style="list-style-type: none"> • Élaborer un savoir et recueillir des données de façon rigoureuse et intégrée pour cerner les enjeux actuels ou nouveaux dans le développement de la politique sociale et des ressources humaines. • Élaborer des stratégies intégrées d'échange de connaissances et de participation pour RHDSC en vue de favoriser la mise en commun de connaissances de grande qualité et de contribuer à la prise de décisions et au dialogue permanent avec les partenaires extérieurs. • Contribuer à l'application des grandes priorités de l'État par des stratégies de données, d'information et de savoir. • Créer une base commune de connaissances sur les tendances du développement de la politique sociale et de la mise en valeur des ressources humaines. • Faire des évaluations dans des secteurs clés pour les politiques et les programmes ministériels. • Favoriser l'intégration des études et des analyses faites à l'étranger en matière de politiques pour l'élaboration des initiatives stratégiques concernant les priorités de mise en valeur des ressources humaines et de développement social.
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Dans cette section, nous décrivons les plans et les priorités de RHDSC par résultat stratégique. Nous présenterons aussi une courte description des sous-activités importantes (initiatives, programmes et services) qui contribuent à la réalisation des priorités en question, ainsi que des données sur les ressources financières et humaines pour les trois prochaines années.

Résultat stratégique



POLITIQUES ET PROGRAMMES QUI RÉPONDENT AUX BESOINS DES CANADIENS EN MATIÈRE DE CAPITAL HUMAIN ET DE DÉVELOPPEMENT SOCIAL

PROGRAMME D'ACTIVITÉ : RECHERCHE EN POLITIQUES ET EN COMMUNICATIONS

RHDSC entend créer une base complète et intégrée de connaissances qui éclaireront l'action gouvernementale en vue de bien répondre aux besoins des citoyens. Ce fonds d'information comporte ce qui suit : élaboration et gestion stratégique des fonds nationaux essentiels en données, analyse des tendances marquantes, recherche sur les questions nouvelles et les meilleures stratégies de mise en valeur des ressources humaines et de développement social et évaluation des grands programmes ministériels. Nous cherchons à échanger de l'information et à nouer des partenariats constructifs avec les groupes qui mènent des activités semblables ou élaboreront des politiques et des programmes qui touchent le mandat du Ministère. En complément de ces échanges, nous exploitons les possibilités de rétroaction et de dialogue féconds avec les citoyens, les entreprises et les familles.

Au cours de la prochaine année, le Ministère aspirera à l'excellence organisationnelle dans la création, la gestion, l'échange et l'utilisation du savoir sur les questions de ressources humaines et de développement social grâce à une initiative de gestion du savoir. Des activités de planification et de gestion des connaissances à caractère prospectif mettront RHDSC dans une position stratégique comme chef de file de la création, de l'échange et de l'exploitation d'un savoir et d'une information à l'échelle canadienne à tous les niveaux. Nous contribuons ainsi à une prise de décisions éclairées, faciliterons la collaboration et les partenariats, coordonnerons les activités des principaux intervenants et confèrerons plus d'efficacité aux politiques et aux programmes.

RHDSC sait qu'il se doit d'expliquer aux citoyens comment leurs vues ont été prises en compte. La conception et l'application d'un plan ministériel de participation publique contribueront aux efforts constants du Ministère en vue de promouvoir et de faciliter la participation et la sensibilisation de la population dans tout ce qui est élaboration et exécution des programmes et en vue aussi de maintenir des relations de transparence et d'interaction avec le public canadien.

Le travail que fait RHDSC avec les autres ministères fédéraux sur les politiques horizontales est essentiel au mieux-être social des Canadiens. Le Ministère se dotera d'une nouvelle orientation stratégique pour l'analyse des rapports hommes-femmes et de la diversité dans la mise en place des politiques et des programmes et il continuera son travail horizontal pour l'établissement sur cinq ans d'une stratégie fédérale d'égalité des sexes. Il continuera aussi à collaborer avec le secteur communautaire sans but lucratif et les ministères fédéraux à la promotion du dialogue, de la coopération et de l'innovation.

ANALYSE DES PLANS, DES PRIORITÉS ET DES ACTIVITÉS DES PROGRAMMES SELON LES RÉSULTATS STRATÉGIQUES

- Politiques et programmes qui répondent aux besoins des Canadiens en matière de capital humain et de développement social
- Productivité et participation canadiennes accrues par des marchés du travail efficaces et inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage
- Milieux de travail sécuritaires, sains, équitables, stables et productifs, où règne la coopération, et normes internationales du travail efficaces
- Amélioration de la sécurité du revenu, accès aux possibilités et mieux être des personnes, des familles et des collectivités
- Amélioration des résultats des Canadiens grâce à l'excellence du service



INDICATEURS DE PROGRAMME (suite)

Pourcentage d'avis produits dans les sept jours suivant la réception des demandes (0 en mars 2005)	80 %
Pourcentage de paiements d'assurance-emploi produits dans les 28 jours suivant la déclaration	80 %
Pourcentage de passeports délivrés par Passeport Canada dans les vingt jours ouvrables suivant la réception de la demande de Service Canada, sans compter le délai de traitement par la poste.	90 %
Pourcentage de premiers paiements à la retraite du Régime de pensions du Canada qui sont produits dans le mois suivant l'admission aux prestations	85 %
Pourcentage de premiers paiements de Sécurité de la vieillesse qui sont produits dans les 30 jours suivant l'admission aux prestations	90 %
Pourcentage de permis de navigation de plaisance délivrés en une visite (service non assuré en mars 2005)	90 %
Pourcentage de numéros d'assurance sociale attribués en une visite (service non assuré en mars 2005)	90 %
Maintien ou augmentation de la satisfaction des clients	Résultat réel
MESURES SUPPLÉMENTAIRES	
Utilisation du Web	Volume réel
Utilisation du téléphone – appels aux agents	Volume réel
Utilisation du téléphone – appels par le Système de réponse vocale interactive	Volume réel
Visites dans les centres de Service Canada	Réponse vocale interactive
Taux d'exactitude des paiements d'assurance-emploi	95 %
Rapidité du service en appel (Régime d'assurance-emploi)	90 %
- Conseil arbitral (30 jours)	100 %
- Juge-arbitre (60 jours)	675 000
Nombre de clients servis par les programmes d'emploi	5 %
Augmentation annuelle du nombre de demandeurs d'emploi au Guichet emplois	5 %
Augmentation annuelle du nombre de postes vacants annoncés au Guichet emplois	Résultat réel à présenter
Satisfaction des clients à l'égard des produits et des services d'information sur le marché du travail – utilité aux fins de la recherche d'emploi	Volume réel à présenter
Nombre de demandes de passeport traitées	Volume réel à présenter
Nombre de demandes traitées de permis de navigation de plaisance	Volume réel à présenter
Nombre de demandes de NAS reçues	Volume réel à présenter
Nombre de demandes au RPC	Volume réel à présenter
Nombre de demandes au Régime d'assurance-emploi	Volume réel à présenter
Nombre de demandes à la Sécurité de la vieillesse	Volume réel à présenter
Nombre de nouveaux services offerts	Volume réel à présenter

Gestion ministérielle – Ressources humaines et langues officielles

Objectif 2006-2007

Équité en matière d'emploi	9,4 %
Représentation des membres de minorités visibles	3,0 %
Représentation des Autochtones	3,6 %
Représentation des personnes handicapées	60,1 %
Représentation des femmes	Résultat réel à présenter
Plaines en matière de langues officielles	Résultat réel à présenter
Langue du travail	
Langue de service au public	

INDICATEURS DE PROGRAMME (suite)

Programme de partenariats pour le développement social, Bureau de la condition des personnes handicapées	46
Nombre de projets (accords de contributions) financés	

INDICATEURS DE PROGRAMME (ENFANTS ET FAMILLES)

Incidence de la faiblesse du revenu – évolution du nombre et de la proportion de familles et d'enfants qui, dans une année, restent en deçà du SFR après impôt à cause de la Prestation nationale pour enfants	Données réelles à présenter
Degré de faiblesse du revenu – évolution du montant global de revenu dont auraient besoin dans une année les familles à faible revenu pour atteindre le SFR après impôt à cause de la Prestation nationale pour enfants	Données réelles à présenter
Nombre d'enfants de moins de six ans à l'égard de qui les parents reçoivent la Prestation universelle pour la garde d'enfants	95 % de tous les enfants de moins de six ans ¹³

INDICATEURS DE PROGRAMME (LOGEMENT ET SANS-ABRI)

Pourcentage d'investissements allant au continuum des mesures de soutien et des services en fonction des priorités arrêtées par la collectivité	1 à 1,5
Rapport entre l'ensemble des investissements dans le cadre de l'Initiative nationale pour les sans-abri, d'une part, et le financement par type de partenaires dans chaque province ou territoire en 2003-2007, d'autre part	Données sur la réception des données ou de données sur l'itinérance
Augmentation des sources accessibles d'information ou de données sur l'itinérance	Améliorer les résultats des Canadiens grâce à l'excellence du service

INDICATEURS DE SERVICE

Augmentation du nombre de points de prestation de services à Service Canada (il y en avait 320 en mars 2005)	533
Disponibilité d'Internet 24 heures sur 24 et 7 jours sur 7 – renseignements et opérations (en mars 2005, seul le volet de l'information était accessible en ligne)	95 %
Pourcentage d'appels auxquels un agent a répondu dans les 180 secondes	95 %
Prolongation des heures d'activité des centres de Service Canada (0 en mars 2005)	60
Pourcentage de disponibilité du Système de réponse vocale interactive	95 %
Maintien ou réduction du nombre de plaintes en matière de langues officielles	Résultats réels
Établissement de points de prestation de services à l'intention des communautés minoritaires de langue officielle (0 en mars 2005)	17
Prestation de services dans des langues autres que le français et l'anglais (0 en mars 2005)	10
Disponibilité de formules en ligne sous des formes accessibles aux personnes handicapées (0 en mars 2005)	10

Cet objectif est établi pour la première année du programme. Pour celles qui suivront, l'objectif sera une protection intégrale du groupe visé.

INDICATEURS DE PROGRAMME (suite)

Nombre de clients devenus salariés ou travailleurs indépendants après une intervention de programme d'emploi et proportion du nombre total de plans d'action menés à bien que représentent ces clients

INDICATEURS DE RENDMENT DE PROGRAMME (COMPÉTENCES EN MILIEU DE TRAVAIL)

Nombre de nouveaux apprentis inscrits à un programme d'apprentissage

Augmentation du nombre de gens de métier qui sont tout à fait mobiles sur le territoire canadien grâce au programme

Nombre d'outils et de procédés mis en place en vue de la vérification et de la reconnaissance des titres de compétence et de l'expérience acquis par les professionnels formés à l'étranger

85

INDICATEURS DE PROGRAMME (APPRENTISSAGE)

Taux de défaut de remboursement des prêts sur trois ans (prêts directs seulement pour 2006-2007)

Nombre de Canadiens ayant jamais reçu la Subvention canadienne pour l'épargne-études et fréquentant un établissement postsecondaire dans l'exercice en cours

Pourcentage de Canadiens de moins de 18 ans ayant jamais reçu la Subvention canadienne pour l'épargne-études

Pourcentage d'enfants admissibles au Bon d'études canadien et inscrits à un régime enregistré d'épargne-études

Satisfaction des clients à l'égard de la qualité générale des services assurés par le Programme canadien de prêts aux étudiants

Satisfaction des clients (fournisseurs de régimes enregistrés d'épargne-études) à l'égard de la qualité générale des services assurés par le Programme canadien pour l'épargne-études

88 %

Milieus de travail sécuritaires, sains, équitables, stables, productifs, où règne la coopération, et normes internationales du travail efficaces

INDICATEURS DE PROGRAMME (TRAVAIL)

Pourcentage de conflits de négociation collective réglés en vertu de la Partie I (relations industrielles) du Code canadien du travail sans arrêt de travail

Pourcentage de plaintes pour congédiement injuste réglées par les inspecteurs (partie III du Code canadien du travail)

Taux de fréquence des accidents invalidants (TFAI) mesurant l'évolution d'année en année de la proportion de blessures et de maladies avec perte de temps et de décès dans les industries relevant de la compétence fédérale

Pourcentage de fonds reçus par rapport aux fonds dus en règlement de plaintes relevant de la partie III (Normes du travail) du Code canadien du travail (les plaintes pour congédiement injuste sont exclues)

Satisfaction du client à l'égard de la qualité des données de la Direction de l'information sur les milieux de travail

80 %

INDICATEURS DE SERVICE

Projection du taux de défaut de remboursement de prêts directs sur trois ans.

Indicateurs de rendement des programmes

INDICATEURS DE PROGRAMME	Productivité et participation canadiennes accrues par des marchés du travail efficaces et inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage
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INDICATEURS DE PROGRAMME (MARCHÉ DU TRAVAIL)

Accès	Pourcentage de chômeurs admissibles aux prestations ordinaires du Régime d'assurance-emploi	Taux de participation des groupes désignés (en auto-déclaration) et des travailleurs âgés aux régimes de prestations d'emploi et de mesures de soutien (PEMS)

Pertinence	Proportion des droits à prestations ordinaires exercés par les prestataires du Régime d'assurance-emploi (%)	Proportion des droits à prestations de maternité et prestations parentales exercés par les prestataires du Régime d'assurance-emploi

Efficience du marché du travail	Nombre de jeunes qui retournent aux études ou trouvent un emploi à la suite d'une intervention de programme d'emploi dans le cadre de la Stratégie emploi jeunesse et proportion du nombre total d'action menés à bien que représentent ces clients	Nombre d'Autochtones qui retournent aux études ou trouvent un emploi après une intervention de programme d'emploi dans le cadre de la Stratégie de développement d'emploi dans le cadre de la Stratégie de développement des ressources humaines autochtones et proportion du nombre total d'action menés à bien que représentent ces clients

	7 400 ⁸	20 500 ⁹

- Les pourcentages présentés traduisent la population de chômeurs par groupe désigné et en proportion de toute la population active canadienne en chômage. Dans le cas des femmes, des Autochtones et des membres de minorités visibles, les données sur le chômage visent la population active de 15 ans et plus; dans le cas des travailleurs âgés, elles visent la population active de 55 ans et plus (Recensement de 2001); enfin, dans le cas des personnes handicapées, elles visent la population active de 15 ans et plus (Enquête de Statistique Canada sur la participation et les limitations d'activités (2001)).
- Ces objectifs ne tiennent pas compte du retour aux études après une participation à l'Initiative Placements carrière-été dans le cadre du programme Expérience emploi été. Les résultats réels sont présentés. (Comme cet indicateur est nouveau, il est impossible d'établir des objectifs sûrs faute de données antérieures suffisantes.)
- Ces objectifs ne tiennent pas compte du retour aux études après une participation à l'Initiative Placements carrière-été dans le cadre du programme Expérience emploi été. Les résultats réels sont présentés. (Comme cet indicateur est nouveau, il est impossible d'établir des objectifs sûrs faute de données antérieures suffisantes.)

CADRE DE MESURE DU RENDEMENT

RHDSC s'engage à mesurer son rendement, à gérer en se fondant sur des résultats et à rendre compte de sa progression. À cette fin, il a établi un cadre de mesure du rendement qui lui permet de comprendre son milieu organisationnel, de définir clairement ses attentes en matière de rendement, de suivre son évolution par des mesures et d'apporter les correctifs nécessaires. Le cadre de mesure du rendement offre au Parlement et aux Canadiens des renseignements pour évaluer la progression du Ministère dans l'obtention des résultats escomptés.

Ce cadre définit trois types d'indicateurs : les indicateurs contextuels, les indicateurs de résultats stratégiques et les indicateurs de programme.

Les **indicateurs contextuels** décrivent l'environnement dans lequel évolue le Ministère en fonction des grandes tendances de la société, de l'économie et du marché du travail, notamment la croissance démographique et le produit intérieur brut par habitant. Les indicateurs contextuels orientent l'élaboration des politiques et des plans ministériels en permettant au Ministère d'évaluer la pertinence des programmes existants, ainsi que la nécessité de nouveaux programmes.

Les **indicateurs de résultats** stratégiques reflètent les résultats optimaux que le Ministère cherche à obtenir pour produire un effet à moyen et à long terme. Il faut savoir que, si les résultats stratégiques demeurent à l'intérieur de la sphère d'influence de RHDSC, le Ministère n'est pas le seul à contribuer à leur réalisation. Les autres gouvernements, les autres ministères fédéraux et les principaux intervenants et collaborateurs, ainsi que chacun des Canadiens, jouent un rôle important pour contribuer à la réalisation de ces objectifs. Par exemple, le pourcentage d'adultes actifs qui ont pris part à la formation spécifique à l'emploi ne s'explique pas seulement par l'influence des programmes de compétences en milieu de travail, mais il subit également l'effet des décisions de chaque employeur et de chaque salarié, des associations patronales et syndicales et des autres niveaux de gouvernement.

Les **indicateurs de programme** concernent plus directement les programmes offerts par le Ministère. Ces indicateurs facilitent l'établissement d'objectifs ou de cibles pour les programmes du Ministère et le suivi des résultats. La plupart de ces indicateurs sont des mesures sur lesquelles le Ministère exerce un contrôle considérable. Les indicateurs de programme peuvent être de nature opérationnelle et liés aux résultats produits par le Ministère. Il s'agit de la satisfaction de la clientèle, de l'accès aux programmes et de leur portée, ainsi que des mesures de l'incidence ou des résultats que le programme a permis d'obtenir.

L'évolution positive des indicateurs de programme doit être considérée comme une condition nécessaire, mais non suffisante, à l'amélioration des résultats stratégiques. En effet, le Ministère reconnaît que les indicateurs de rendement ne sont qu'une partie d'un cadre de mesure du rendement complet. Les évaluations de programme périodiques et approfondies peuvent également constituer d'importantes sources d'information sur l'efficacité des programmes de RHDSC.

RHDSC continuera de travailler au renforcement des indicateurs de rendement en s'appuyant sur les résultats des recherches et des évaluations. Par ses efforts permanents d'évaluation de programmes et d'examen systématique, le Ministère évaluera la pertinence et la validité des indicateurs de rendement dans la mesure où ils se rapportent à la réalisation des résultats attendus pour les Canadiens.

Les **indicateurs de service** se rapportent à la qualité, à la rapidité et à la quantité des services offerts aux Canadiens.

Le site Web du Ministère (<http://www.RHDSC.gc.ca>) contient un document complémentaire où l'on donne des explications détaillées sur les indicateurs de rendement de RHDSC selon les résultats stratégiques et les sources de données.

Grâce à d'excellentes pratiques de gestion et de formation et d'outils supérieurs d'apprentissage, RHDSC constituera une organisation de chefs de file ayant la capacité d'assurer la compétence de son effectif. Nous continuerons de promouvoir l'utilisation des deux langues officielles en milieu de travail, et nous travaillerons à la réalisation des objectifs de diversité de notre effectif par une stratégie sur la diversité. Dans la mise en œuvre de la nouvelle politique d'apprentissage dans la fonction publique et des programmes de perfectionnement ciblés pour les milieux professionnels spécialisés, nous continuerons de veiller à ce que notre effectif soit productif et axé sur des principes, et à ce qu'il contribue au maintien de la capacité stratégique du Ministère.

RHDSC élaborera et mettra en œuvre un modèle de prestation des services axé sur la clientèle pour les ressources humaines. Il s'agit d'adopter une approche globale pour tous les aspects de la gestion des ressources humaines, la prestation des services et la responsabilisation, de façon à contribuer à l'atteinte des résultats stratégiques du Ministère. De plus, la planification des ressources humaines sera pleinement liée à la planification opérationnelle, puisqu'on se servira des outils d'intégration conçus à l'intention des planificateurs stratégiques, des ressources humaines et des gestionnaires. Ces stratégies permettront aux gestionnaires et aux employés de s'adapter plus facilement aux changements organisationnels et à l'évolution des programmes, notamment à l'intégration de RHDSC.

RHDSC lancera des initiatives visant favoriser le leadership et l'apprentissage et à établir un environnement créateur pour les employés. Il verra notamment à donner suite aux projets proposés par des employés dans le cadre du Fonds pour la créativité et il fera l'évaluation du Centre de garde Place Vanier.

Enfin, RHDSC tâchera de mettre au point les structures de gouvernance avec Service Canada relativement à la prestation de services transactionnels pour les ressources humaines, l'informatique et l'administration. L'un des principaux aspects de ce travail sera l'élaboration de calendriers de services dans chacun de ces domaines. Ces ententes seront elles-mêmes régies par des tableaux qui définiront clairement les responsabilités et les activités en cours dans un grand nombre de domaines de service. L'élaboration de relations solides sera un facteur crucial pour que les services transactionnels partagés répondent aux besoins ministériels de RHDSC et favorisent la réalisation des résultats stratégiques

TABEAU 2B : PRIORITÉS DE GESTION DE RHDSC (suite)

GESTION DES RESSOURCES HUMAINES	
<ul style="list-style-type: none"> • Servir de modèle pour tout organisme juste, habilitant, sécuritaire, productif et axé sur des valeurs et des principes. • Accroître la viabilité et l'adaptabilité de l'effectif ministériel par la planification des ressources humaines, le recrutement, la gestion de la relève, la gestion du rendement et l'apprentissage continu. • Être un employeur modèle en matière d'accessibilité dans tous les aspects de la relation de travail. 	

Les services ministériels jouent un rôle essentiel pour la réalisation des priorités et des résultats de RHDSC

Les services ministériels jouent un rôle essentiel pour la réalisation des priorités et des résultats stratégiques et veillent à ce que les exigences des Canadiens et du Parlement soient respectées. Les services ministériels de RHDSC, c.-à-d. les ressources humaines, les services ministériels, la fonction de contrôle, les services juridiques, les systèmes et la gestion ministérielle, ont tous des priorités intégrées aux résultats stratégiques généraux du Ministère, et apportent une contribution essentielle à l'efficacité générale du Ministère et à sa capacité de remplir son mandat.

Il est essentiel que le Ministère s'engage à assurer l'excellence de la correspondance ministérielle et des services parlementaires, des services aux bureaux des ministres, du secrétaire parlementaire et des sous-ministres. RHDSC doit notamment soutenir les principales priorités décrites dans le budget fédéral de 2006, notamment la Prestation universelle pour la garde d'enfants, l'initiative sur les places en garderie, les initiatives d'apprentissage, l'Agence de reconnaissance des titres de compétence étrangers, et les initiatives concernant l'apprentissage et les études postsecondaires.

Nous nous sommes engagés à garantir en permanence un milieu de travail juste, habilitant, sain et sécuritaire. En mettant en œuvre la *Loi sur la modernisation de la fonction publique*, nous voulons poursuivre la formation et le soutien des gestionnaires, des employés et du personnel et maintenir les communications avec eux. RHDSC appuie les gestionnaires de tous les niveaux de l'organisation en vue de s'acquitter des responsabilités qui lui ont été déléguées dans le cadre de la modernisation de la fonction publique, et de ses responsabilités comme le Cadre de responsabilisation de gestion. Les services ministériels joueront un rôle essentiel dans le soutien de l'intégration ministérielle par la prestation de services de gestion et l'application de stratégies efficaces dans des domaines comme les ressources humaines, l'informatique, la gestion de l'information et les services administratifs. L'intégration des processus ministériels de prise de décisions continuera de s'améliorer. Ainsi, les gestionnaires, par l'intégration efficace d'éléments comme la planification stratégique et la gestion du rendement, la planification opérationnelle et ministérielle, l'affectation des ressources, les ressources humaines, la planification des finances et des systèmes, la mesure du rendement, la vérification, la gestion des risques et l'évaluation, sont en mesure de faire les meilleurs choix en matière d'utilisation de ressources et de soutenir des efforts globaux visant à améliorer la gestion des dépenses au gouvernement.

En mettant en place la Loi fédérale sur l'imputabilité, le Ministère s'est engagé à renforcer la responsabilisation

Pour le nouveau gouvernement et le Ministère, il est important d'être responsable. En mettant en place la Loi fédérale sur l'imputabilité et le plan d'action, le gouvernement du Canada prend des mesures précises pour renforcer la responsabilisation et accroître la transparence et la supervision (www.faa-ffi.gc.ca). L'engagement de RHDSC envers la loi portera principalement sur le renforcement des fonctions de vérification et de responsabilisation, et sur l'examen des subventions et des contributions.

Les autres priorités internes qui renforceront la responsabilisation et accroîtront la transparence et la supervision concernent généralement l'amélioration de la bonne gouvernance, de la gérance financière et de la gestion des ressources humaines.

TABEAU 2B : PRIORITÉS DE GESTION DE RHDSC

GOUVERNANCE ET GESTION EFFICACE	
<ul style="list-style-type: none"> Assurer un bon leadership et une bonne communication dans la gestion de l'intégration du Ministère. Moderniser les services ministériels partagés. Assurer une relation de gouvernance efficace entre l'élaboration de politiques, la conception de programmes et la prestation de services par l'intermédiaire de Service Canada. Assurer la bonne gouvernance de la participation considérable du Ministère aux activités horizontales et intergouvernementales. Mettre en œuvre le nouveau modèle de régie des communications pour les subventions et les contributions. Mettre en place un programme de communications internes solide qui soutient une culture commune et offre des renseignements à jour et des outils de communications aux employés de RHDSC. 	
GÉRANCE FINANCIÈRE	
<ul style="list-style-type: none"> Accroître et soutenir l'intégrité de l'analyse financière, en faisant le suivi et en produisant des rapports pour soutenir la prise de décisions au Parlement et à la direction. Améliorer les mesures du rendement et la gestion des risques ministériels. Renforcer l'intégrité des programmes en améliorant les renseignements sur l'identité et en réduisant l'erreur et la fraude. Renforcer la vérification interne conformément à la Politique en matière de vérification interne. Examiner la gestion des subventions et des contributions. Par l'intermédiaire de Service Canada, faire face aux engagements d'économies présentés dans l'examen des dépenses. 	

TABLEAU 2A : PRIORITÉS DE RHDSC SELON LE RÉSULTAT STRATÉGIQUE (suite)

MILIEUX DE TRAVAIL SÉCURITAIRES, SAINS, ÉQUITABLES, STABLES, PRODUCTIFS, OÙ RÉGNE LA COOPÉRATION, ET NORMES INTERNATIONALES DU TRAVAIL EFFICACES

- Procéder à un examen détaillé de la partie III (Normes du travail) du *Code canadien du travail*.
- Elaborer des options de politique pour un système fédéral modernisé d'indemnisation des accidentés du travail.
- Terminer les préparatifs du Programme de protection des salariés.
- Procéder à l'examen parlementaire de la *Loi sur l'équité en matière d'emploi*.

TRAVAIL

AMÉLIORATION DE LA SÉCURITÉ DU REVENU, ACCÈS AUX POSSIBILITÉS ET MIEUX ÊTRE DES PERSONNES, DES FAMILLES ET DES COLLECTIVITÉS

- Améliorer la sécurité du revenu et la participation active dans les collectivités.
- Abattre les obstacles à la pleine participation à la richesse de la vie canadienne et des collectivités du pays.
- Soutenir les efforts du secteur communautaire sans but lucratif visant à innover, à renforcer les réseaux de collaboration, à créer des capacités et à échanger des pratiques exemplaires pour contribuer au bien-être des collectivités.

INVESTISSEMENT SOCIAL

- Assurer un soutien et des choix aux familles par le nouveau Plan universel pour la garde d'enfants du Canada et d'autres initiatives déjà lancées en vue de garantir que leurs enfants auront le meilleur départ possible dans la vie.

ENFANTS ET FAMILLES

- Contribuer à la lutte livrée à l'itinérance au Canada.
- Elaborer des politiques de logement et d'itinérance pour les Canadiens, y compris pour les Autochtones.
- Renforcer les liens horizontaux entre le logement, l'itinérance et d'autres secteurs stratégiques.

LOGEMENT ET SANS-ABRI

AMÉLIORER LES RÉSULTATS DES CANADIENS GRÂCE À L'EXCELLENCE DU SERVICE

SERVICES TRANSPARENTS AXÉS SUR LE CITOYEN

- Transformer le service aux Canadiens.
- Reconnaître et récompenser une culture d'excellence du service.
- Renforcer la responsabilité et la transparence.

INTÉGRITÉ

- Transformer le service aux Canadiens.
- Réaliser l'intégration de l'information des clients.

GOUVERNEMENT QUI FAVORISE LA COLLABORATION ET LE RÉSEAUTAGE

TABLEAU 2A : PRIORITÉS DE RHDSC SELON LE RÉSULTAT STRATÉGIQUE

POLITIQUES ET PROGRAMMES QUI RÉPONDENT AUX BESOINS DES CANADIENS EN MATIÈRE DE CAPITAL HUMAIN ET DE DÉVELOPPEMENT SOCIAL

RECHERCHE EN POLITIQUES ET COMMUNICATIONS

- Promouvoir les principales politiques de ressources humaines et de développement social du gouvernement du Canada.
- Élaborer et mettre en œuvre les principaux cadres et stratégies du Ministère.
- Faire avancer l'acquisition de connaissances pour soutenir une prise de décisions éclairées.
- Accroître la participation et la collaboration de nos partenaires et des Canadiens par l'engagement public et d'autres activités pour améliorer et rendre novatrices et complémentaires les initiatives stratégiques.

PRODUCTIVITÉ ET PARTICIPATION CANADIENNES ACQUÉES PAR DES MARCHÉS DU TRAVAIL EFFICIENTS ET INCLUSIFS, DES MILIEUX DE TRAVAIL COMPÉTITIFS ET L'ACCÈS À L'APPRENTISSAGE

MARCHÉ DU TRAVAIL

- Travailler avec les provinces, les territoires et les intervenants et veiller à ce que les programmes du marché du travail soient cohérents, complets et souples.
- Donner des conseils sur le soutien du revenu offert par l'assurance-emploi pour veiller à ce qu'il demeure bien adapté aux besoins de l'économie et de la main-d'œuvre du pays.
- Créer plus de partenariats efficaces pour améliorer les résultats des Autochtones sur le marché du travail.
- Élaborer des approches de réduction des obstacles et aider les Canadiens vulnérables, comme les jeunes à risque, les personnes handicapées et les travailleurs âgés, à participer au marché du travail.

COMPÉTENCES EN MILIEU DE TRAVAIL

- Exposer une stratégie intégrée des compétences en milieu de travail en travaillant avec les provinces, les territoires, les principaux ministères et les grands intervenants pour faire avancer de multiples activités, comme l'enseignement des métiers, la formation-apprentissage, la reconnaissance des titres de compétence étrangers, l'information sur le marché du travail et les initiatives sectorielles.

APPRENTISSAGE

- Continuer d'évaluer les options en matière de programmes et de politiques pour éliminer les obstacles, financiers ou non, à l'accès aux études postsecondaires et à l'apprentissage continu.
- Mettre en œuvre le programme d'apprentissage des adultes, d'alphabetisation et de compétences essentielles et conclure la mise en œuvre du Bon d'études canadien.

Priorités du Ministère

RHDSC a établi des priorités pour 2006-2007 en s'inspirant de l'évaluation de son mandat et en tenant compte des objectifs généraux du gouvernement du Canada et du milieu dans lequel il évolue.

Possibilité pour RHDSC de mettre en œuvre les grandes priorités du

gouvernement

Le discours du Trône et le budget de 2006 définissent le programme du gouvernement et retiennent ses cinq grandes priorités. Parmi celles-ci, le gouvernement a confirmé son engagement à offrir des choix en matière de services de garde d'enfants au Canada.

Le budget de 2006 explique en détail les modalités de la Prestation universelle pour la garde d'enfants, régime prévoyant que les familles canadiennes recevront des prestations de 1 200 \$ par année pour chaque enfant de moins de six ans. Toutes les familles ayant de jeunes enfants en bénéficieront, peu importe leur revenu et le type de service de garde qu'elles choisissent.

Dans le budget de 2006, le gouvernement s'est également engagé à créer d'autres places en garderie. RHDSC prépare actuellement une stratégie de consultation des provinces et des territoires, des employeurs, des organismes communautaires sans but lucratif, des parents et de la population canadienne pour éclairer la conception de l'initiative sur les places en garderie.

Outre le Plan universel pour la garde d'enfants du Canada, le budget de 2006 énonce les principaux engagements du gouvernement ayant une importance pour RHDSC, comme les compétences en milieu de travail et l'apprentissage permanent. Le Ministère a également reçu 18 millions de dollars sur deux ans pour créer l'Agence canadienne d'évaluation et de reconnaissance des titres de compétence étrangers. Quant à la formation par l'apprentissage, RHDSC procédera à la mise en œuvre d'une subvention aux apprentis. Le budget de 2006 prévoit de réduire la contribution des parents au Programme canadien de prêts aux étudiants, d'instituer un crédit d'impôt aux manuels scolaires et d'abolir l'imposition des bourses d'études et d'entretenir. Les autres engagements du gouvernement annoncés dans le budget de 2006 qui touchent RHDSC sont les programmes visant à prévenir la criminalité chez les jeunes, ainsi qu'une étude de faisabilité comportant l'examen d'options pour remédier aux problèmes d'emploi et d'activité (sur le marché du travail) des travailleurs âgés.

Les priorités de RHDSC pour 2006-2007 sont résumées dans les tableaux qui suivent.

La réalisation des résultats stratégiques ne dépend pas uniquement du Ministère

Le Ministère ne peut pas atteindre à lui seul ses objectifs, il lui faut des partenaires. Son succès dépend de la participation active d'un grand nombre d'intervenants. Pour que les Canadiens aient accès aux outils leur permettant de participer pleinement au marché du travail et à la société, on a besoin du concours actif d'une multitude de partenaires, et le Ministère doit servir de catalyseur.

RHDSC travaille en collaboration avec ses partenaires des provinces et des territoires, les Autochtones, les organismes bénévoles communautaires, les organismes sans but lucratif et la population canadienne, en s'appuyant sur des relations établies par les forums multilatéraux actuels et sur les relations bilatérales pour remplir ses engagements. Les employeurs et les syndicats jouent également un rôle important dans l'établissement de programmes de formation et d'apprentissage en milieu de travail et dans la création de lieux de travail productifs, stables et sécuritaires. Enfin, les personnes et les choix qu'elles font sont essentiels à la réalisation des objectifs du Ministère.

PRIORITÉS DU MINISTÈRE ET CADRE DE MESURE DU RENDEMENT



Conclusion

Il est important de renforcer la capacité de RHDSC d'atténuer les risques et les incertitudes pour qu'il puisse élaborer des politiques efficaces et améliorer la prestation des services. De plus, le Ministère continue de renforcer la pratique de la gestion intégrée des risques pour bien gérer les risques stratégiques et opérationnels permanents de la prestation de services à l'intérieur ou par l'intermédiaire de partenariats avec d'autres organismes publics ou privés. Comme le Ministère est à la poursuite de l'excellence, la gestion des risques, y compris la supervision des stratégies d'atténuation, demeure une priorité.

compétences de son personnel, tout en veillant à la qualité de ses politiques, de ses programmes et de ses services.

Il y a une pénurie de personnes compétentes et expérimentées dans plusieurs milieux professionnels spécialisés, comme les ressources humaines, les finances et la vérification interne, et dans certains programmes de spécialisation, comme les relations industrielles et la santé et sécurité au travail. Ces pénuries accentuent le problème de recrutement et de maintien en poste de personnes hautement spécialisées au Ministère.

Ce problème est encore plus complexe depuis la réunification ministérielle en février 2006. Aux premières étapes de l'intégration, l'incertitude entourant les rôles et les responsabilités et le changement organisationnel créent un stress supplémentaire et une lassitude devant le changement. Cette vague d'incertitude nuise à notre capacité d'attirer et de garder du personnel compétent. Afin de réduire ces risques, nous cherchons ardemment à renforcer la gestion des ressources humaines. Une stratégie d'apprentissage panministérielle, actuellement en cours d'élaboration, guidera la mise en œuvre continue de la *Loi sur la modernisation de la fonction publique*. Les principaux éléments de cette stratégie sont la nouvelle planification intégrée des ressources humaines et des activités, l'établissement de stratégies optimales de gestion de ressources humaines et les perspectives intégrées de formation et d'apprentissage pour les employés.

De plus, nous élaborons actuellement un énoncé clair de la vision et de la mission du Ministère pour tous les employés. Il s'agit d'aider RHDSC à mieux définir son rôle et à clarifier son mandat. Le changement provoqué par l'intégration de Ressources humaines et Développement social Canada sera guidé par un plan de transformation qui portera sur le maintien et la mise en œuvre d'un changement culturel et organisationnel efficace et permanent.

Qualité de la gouvernance et de la supervision

Risque : Notre capacité d'exercer une gouvernance et une supervision de qualité sur la gérance des ressources et l'état des contrôles internes dans un milieu de grands changements organisationnels et d'évolution des relations hiérarchiques.

Dans un contexte où les attentes d'imputabilité accrue des programmes et des services gouvernementaux sont élevées, le Ministère doit continuer à atténuer les problèmes liés à l'élaboration d'un bon régime de gouvernance et de supervision. Mentionnons notamment la communication d'une meilleure information sur le rendement en fonction des résultats et l'assurance de la gestion des risques, l'état des contrôles internes et les processus de gouvernance. Puisque le Ministère continue de mettre en œuvre un cadre de gouvernance pour structurer sa relation avec Service Canada, il devrait aussi remplir les exigences de la Politique du Conseil du Trésor en matière de vérification interne et s'inspirer du modèle de « chef de la direction financière » pour renforcer la gestion des finances. Ces nouvelles exigences influenceront peut-être sur notre capacité de répondre à la totalité des attentes et des exigences de conformité tant au Ministère que dans l'ensemble du gouvernement.

Plusieurs stratégies nous permettront d'atténuer ce risque. Le renforcement des liens entre l'élaboration de politiques et la conception de programmes, la recherche et les compétences, les résultats des évaluations de programmes et les approches de gestion axées sur les résultats, se traduira finalement par de meilleurs résultats pour les Canadiens et une meilleure mesure de ces résultats. L'évaluation du Cadre de contrôle financier et la capacité de supervision financière du Bureau du contrôleur guideront l'élaboration de stratégies visant à atténuer les risques financiers. L'examen ministériel des subventions et des contributions nous permettra d'élaborer des recommandations visant à accroître la souplesse de la prestation des programmes, tout en maintenant l'intégrité des programmes et des activités de subventions et contributions. L'intégrité des programmes, la responsabilité claire et la gestion financière efficace continueront d'attirer l'attention de la haute direction.

Risques ministériels

Etablissement du contexte

L'analyse des évaluations environnementales et les données sur les risques recueillies tant au Ministère que dans les activités de programme nous ont permis de répertorier trois principaux risques et les difficultés connexes auxquels pourraient se heurter le Ministère dans la réalisation de ses objectifs et de ses engagements pour 2006-2007. Les principaux facteurs de risque sont les suivants :

- l'établissement de relations avec nos partenaires et les intervenants externes;
- le recrutement et le maintien de personnes compétentes et spécialisées;
- la qualité de la gouvernance et de la supervision.

Ci-après des explications qui donnent un aperçu des risques les plus importants auxquels le Ministère sera confronté pendant l'exercice de planification 2006-2007. Nous avons évalué les risques principaux et déterminés dans quelle mesure le Ministère peut y faire face afin d'éclairer l'établissement des priorités mentionnées dans le présent rapport.

Etablissement de relations avec nos partenaires et les intervenants externes

Risque : Notre capacité d'établir et d'entretenir de bonnes relations avec nos partenaires et les intervenants externes afin d'assurer la réalisation dans les délais prévus de notre programme social et économique et le respect de nos engagements.

Le Ministère doit relever le défi d'élaborer des partenariats efficaces pour atteindre ses objectifs, c.-à-d. améliorer la sécurité du revenu, travailler avec les collectivités et faire avancer un programme politique axé sur les compétences et l'apprentissage permanent. À cette fin, il y a de nombreuses responsabilités partagées entre le gouvernement du Canada, les provinces et les territoires, les Autochtones, les autres collectivités et le secteur privé. Comme il est précisé à la section Contexte stratégique, il est essentiel d'établir des partenariats pour que le Ministère obtienne des résultats sociaux et économiques. Étant donné la complexité des relations de gouvernance à de multiples niveaux et comme les intervenants entendent de plus en plus jouer un rôle stratégique dans la prise de décisions, il pourrait nous être plus difficile d'accomplir des progrès suffisants dans l'élaboration de bonnes politiques.

Pour atténuer ce risque, le Ministère maintient des liens étroits avec les spécialistes et les groupes d'intervenants nationaux et traditionnels, mais il élabore aussi des stratégies fédérales-provinciales-territoriales de participation des intervenants pour favoriser l'échange de connaissances, les programmes de collaboration à long terme et les nouvelles possibilités de gouvernance à de multiples niveaux ainsi que de nouveaux partenariats. Il continuera également de tirer parti des liens entre les ministères fédéraux pour faciliter la participation de partenaires. Les priorités et les activités de programme décrites dans le présent rapport sont une illustration des mesures de soutien et de renforcement des initiatives fondées sur des partenariats visant à atteindre nos objectifs et nos résultats stratégiques.

Recrutement et maintien de personnes compétentes et spécialisées

Risque : Notre capacité d'attirer des personnes compétentes et spécialisées, de les maintenir en poste et de les perfectionner, ce qui entravera peut-être à notre capacité de tenir nos engagements et de faire preuve de diligence raisonnable.

L'un des principaux défis que nous devons relever en 2006-2007, est la création et le renforcement de notre capacité en matière de ressources humaines. Le Ministère reconnaît qu'une bonne gestion et un bon rendement organisationnel dépendent de la capacité de son effectif. Le Ministère s'est engagé à agir comme chef de file du changement et de l'innovation en améliorant les connaissances et les

De plus, le Ministère devra de plus en plus œuvrer dans le contexte de résultats partagés et de partenariats avec les provinces et les territoires, le secteur privé, les collectivités, les syndicats, les Autochtones et d'autres collaborateurs.

Contexte de service

Les Canadiens veulent obtenir un service rapide et commode. Partout dans le monde, la satisfaction des citoyens et la confiance générale dans la capacité du gouvernement d'offrir de meilleurs services est un idéal important. Accenture a fait en 2006 un sondage dont le thème était « le leadership dans le service à la clientèle : établir la confiance ». Le sondage a montré que le Canada est à l'avant-garde de la tendance visant à offrir des services axés sur les citoyens et à transformer la prestation des services. La grande majorité des Canadiens souhaitent être en mesure d'obtenir la plus grande partie des services gouvernementaux par l'intermédiaire d'un seul organisme fédéral et la plupart pensent qu'une telle initiative améliorerait le service.

Contexte parlementaire

RHDSC doit travailler efficacement avec des organes de supervision du Parlement comme les comités parlementaires permanents, le Bureau du vérificateur général, le Commissaire à l'environnement et au développement durable, le Commissaire à la protection de la vie privée, le Commissaire à l'information et la Commission de la fonction publique. De plus, le Secrétariat du Conseil du Trésor, le Bureau du contrôleur général et l'Agence de gestion des ressources humaines de la fonction publique assurent une supervision interne au gouvernement.

Voici des rapports de la vérificatrice générale et des comités du Parlement qui ont été publiés et qui proposent des recommandations d'une importance particulière pour la direction de RHDSC :

- Rapport du Comité permanent du développement des ressources humaines, du développement des compétences, du développement social et de la Commission des personnes handicapées – étude sur les fonds de l'assurance-emploi, 2005
<http://cmtte.parl.gc.ca/cmtte/CommitteePublication.aspx?COM=8982&SourceId=100965&SwitchLanguage=1>
- Rapport du Comité permanent du développement des ressources humaines, du développement des compétences, du développement social et de la Commission des personnes handicapées – étude sur le programme Placements carrière-été, 2005
<http://cmtte.parl.gc.ca/cmtte/CommitteePublication.aspx?COM=8982&Lang=1&SourceId=136509>
- Rapport du Comité permanent du développement des ressources humaines, du développement des compétences, du développement social et de la Commission des personnes handicapées – Le rapport sur les enjeux relatifs à l'accessibilité pour les personnes handicapées de la Cité parlementaire et de la fonction publique fédérale, 2005
<http://cmtte.parl.gc.ca/cmtte/CommitteePublication.aspx?COM=8982&SourceId=121676&SwitchLanguage=1>
- Rapport de la vérificatrice générale du Canada 2005, chapitre 4, La gestion des initiatives horizontale
<http://www.oag-bvg.gc.ca/dominio/rapports.nsf/html/20051104cf.html>
- Rapport de la vérificatrice générale du Canada 2006, chapitre 6, La gestion des subventions et des contributions votées
<http://www.oag-bvg.gc.ca/dominio/rapports.nsf/html/20060506cf.html>

L'intérêt du Ministère au Canada, RHDSC participe également à des forums internationaux comme les projets de l'Organisation de coopération et de développement économiques (OCDE) et des pays du G8 sur l'emploi international, les directives stratégiques sur l'apprentissage, la recherche et l'échange de connaissances. Les résultats de ces travaux servent à l'élaboration de politiques au Canada. Afin que les politiques canadiennes d'emploi, d'apprentissage et d'ordre social offrent un milieu concurrentiel qui rend notre main-d'œuvre attrayante pour les investisseurs étrangers.

Cette année, l'OCDE lance une nouvelle Stratégie pour l'emploi qui influera sur la politique relative au marché du travail et au développement des compétences au cours des dix prochaines années dans la plupart des pays développés. RHDSC a accueilli le sommet de l'OCDE sur la nouvelle Stratégie pour l'emploi à Toronto en juin 2006. RHDSC continuera de travailler en collaboration avec l'OCDE afin que cette nouvelle stratégie devienne un outil utile nous permettant de relever les défis du capital humain au cours des prochaines années.

La présence à part entière et égale des femmes sur le marché du travail et dans la société demeure une importante dimension de la nouvelle orientation vers le capital humain. Conformément aux engagements nationaux et internationaux du Canada, le Ministère fait des analyses et entreprend des activités afin que la mise en œuvre et l'évaluation des méthodes d'élaboration des politiques et des programmes contribuent à l'égalité des sexes. Le Canada doit également tenir compte de ses engagements nationaux et internationaux en matière de droits de la personne en général lorsqu'il élabore ses politiques et ses programmes, et inviter d'autres ministères à respecter ces engagements.

Gestion

Contexte gouvernemental

Une des grandes priorités du gouvernement est la *Loi fédérale sur l'imputabilité*. Le 11 avril 2006, le gouvernement a présenté le projet de loi C-2 intitulé *Loi fédérale sur l'imputabilité* et publié un plan d'action connexe sur les mesures visant à renforcer l'imputabilité et à accroître la transparence et le suivi des activités gouvernementales. La loi en question vise à ce que le gouvernement du Canada réponde, dans la totalité de ses rôles, aux plus hautes normes d'intégrité, d'efficacité et de responsabilité. Elle est actuellement étudiée par le Sénat.

Une saine gestion est à la base d'un gouvernement efficace et responsable. Le Cadre de gestion et de responsabilité fixe les normes de gestion au gouvernement du Canada et il est le fondement de la responsabilité en matière de gestion entre les ministères, le Secrétariat du Conseil du Trésor et l'Agence de gestion des ressources humaines et de la fonction publique. C'est par ce cadre redditionnel que les administrateurs généraux veillent à réunir des conditions de bonne gestion pour produire des résultats avantageux pour les Canadiens. Ce cadre énonce dix principes essentiels de saine gestion assortis d'un jeu d'indicateurs et de mesures liées qui clarifient les attentes et permettent aux ministères de surveiller le rendement.

Contexte ministériel

Les dispositions financières du Ministère touchent les programmes législatifs, les subventions et les contributions, les dépenses de fonctionnement, les ententes de programme avec les provinces et les territoires et les paiements de transfert législatifs. Le Ministère compte trois principales sources de financement : le Trésor public (ressources votées chaque année par le Parlement et financement des programmes législatifs), le Compte d'assurance-emploi et le Régime de pensions du Canada.

En outre, le Ministère doit évaluer à l'intérieur d'une multitude de domaines (recherche, politiques, élaboration de programmes et prestation de services) et assumer une multitude de responsabilités dans les domaines du développement social, du développement du marché du travail, des relations de travail, de l'apprentissage, de la sécurité du revenu, etc.

Contexte stratégique

Le Ministère intègre le marché du travail, l'apprentissage et la politique sociale pour orienter sa démarche en vue de favoriser l'atteinte de résultats sociaux et économiques durables pour tout le monde. Un facteur clé sera la poursuite de l'examen des stratégies régionales et sectorielles permettant de relever les défis dans ce domaine.

Comme aucun gouvernement ne peut à lui seul réaliser ses objectifs dans tous ces domaines prioritaires, il est essentiel d'établir des partenariats pour assurer le succès. Le milieu stratégique d'aujourd'hui exige une meilleure compréhension et beaucoup plus de bons partenariats avec les provinces, les territoires, les collaborateurs étrangers, les employeurs, le secteur communautaire sans but lucratif, les partenaires sociaux, les syndicats et d'autres intervenants clés comme les établissements d'enseignement. Il est particulièrement important de travailler avec les autres gouvernements dans les domaines de compétence partagée ou d'intérêt mutuel. RHDSC favorise ces relations en mettant sur pied plusieurs forums, mécanismes de travail et contacts bilatéraux fédéraux-provinciaux-territoriaux.

Le Ministère doit aussi de plus en plus répondre aux attentes des Canadiens, qui exigent la meilleure qualité de service, la responsabilité et la transparence. La responsabilité et la structure hiérarchique restent l'un des piliers fondamentaux de ces relations et des résultats stratégiques. Les politiques et les programmes doivent être conçus et exécutés de manière à obtenir des résultats concrets pour les Canadiens. Ces politiques doivent s'inspirer des pratiques exemplaires et des démarches d'autres pays si on veut que le développement social et économique du Canada soit durable.

Grands objectifs :

- Promouvoir la participation au marché du travail, l'apprentissage permanent et la vie en société et, à cette fin, enrichir les choix et faire preuve d'une plus grande souplesse, contribuer à la prise de décisions en élaborant et en rendant accessibles des connaissances et des renseignements de qualité de sorte que tous les Canadiens aient la possibilité de contribuer au développement social et économique et d'en tirer parti.
- S'occuper de la sécurité économique par des mesures visant à aider les Canadiens défavorisés à parvenir à la sécurité du revenu, à combattre la pauvreté chez les enfants et les obstacles multiples pour les groupes vulnérables qui s'exposent à l'exclusion, ce qui comprend les fractions les plus marginalisées de la société comme les personnes handicapées et les sans-abri.
- Équilibrer les responsabilités des Canadiens en matière de revenu et de soins grâce à des politiques qui aident à concilier le travail et la vie personnelle, notamment la souplesse quant au choix d'un service de garde, et à répondre parfaitement aux besoins des soignants.
- Améliorer les compétences, notamment les compétences essentielles et l'alphabétisation, et promouvoir l'apprentissage continu de sorte que les Canadiens puissent acquérir et constamment développer les compétences dont ils ont besoin pour répondre à la demande dans les secteurs en croissance.
- Soutenir les efforts communautaires pour améliorer la vie des Canadiens en aidant les collectivités, les institutions et les réseaux à définir leurs besoins et leurs problèmes particuliers. Élaborer des politiques et travailler en partenariat pour trouver des solutions novatrices aux problèmes sociaux comme de nouveaux outils d'autosuffisance.
- Veiller d'embellie à ce que les relations syndicales-patronales contribuent à l'établissement de milieux de travail sécuritaires, productifs et coopératifs.

Le Ministère prend part à plusieurs forums internationaux et collabore avec des partenaires à l'étranger sur diverses questions par la voie de discussions stratégiques, d'ententes officielles, de travaux de recherches et de coopération technique avec des pays en développement. Il veille à ce que les intérêts du Canada soient représentés à l'étranger. Par exemple, conformément à son objectif de bien reléver

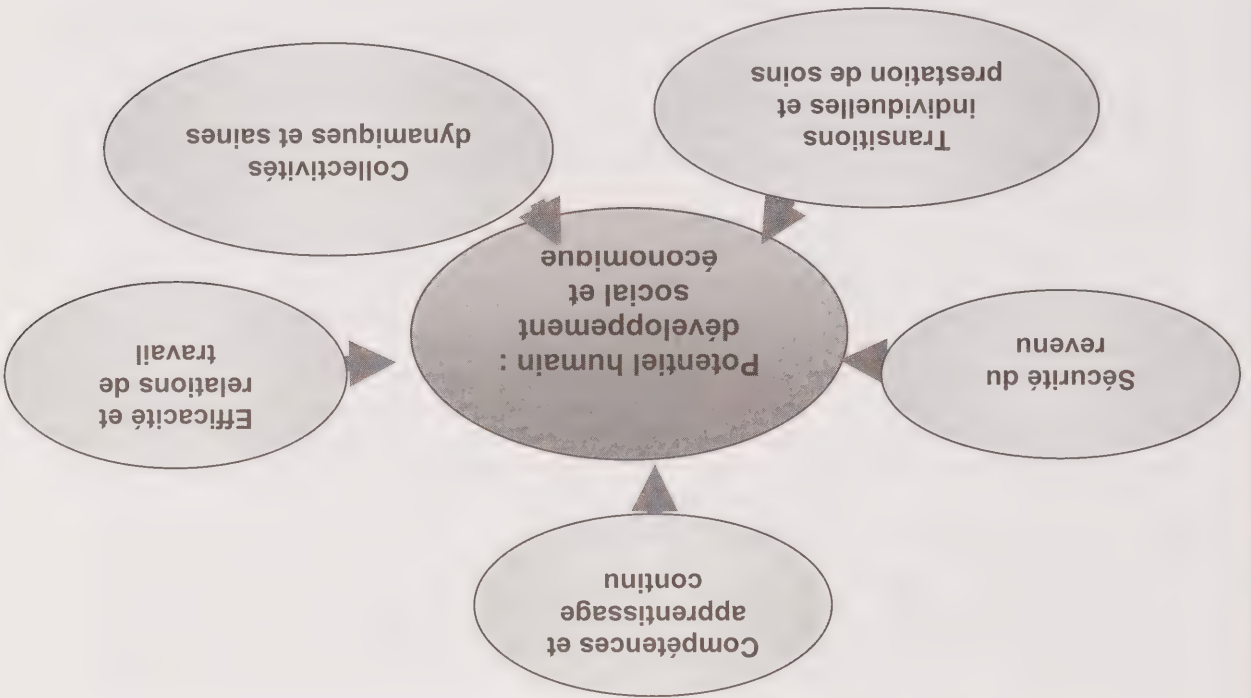
contribuer davantage à cet objectif d'un grand nombre de manières, notamment en investissant dans les familles et les enfants, en enrichissant l'infrastructure du « savoir » au Canada par l'élaboration de données, d'information, d'études et d'autres données pertinentes et actuelles servant à la prise de décisions au cours d'une vie, en travaillant avec les employeurs et les syndicats pour moderniser les normes fédérales du travail, en investissant dans les collectivités et en collaborant avec des partenaires pour réduire l'itinérance.

Problèmes sociaux et économiques

Pour que les Canadiens aient des perspectives d'avenir, il faudra apporter des modifications considérables à nos politiques, à nos programmes et à nos partenariats. De plus, la position du Canada sur le marché du travail mondial et le bien-être des Canadiens dépendra de sa capacité de réagir rapidement et avec imagination aux problèmes suivants :

- la participation et l'inclusion
- l'équilibre entre le revenu et les soins
- le faible revenu
- les niveaux d'alphabétisation
- le soutien des adultes en apprentissage
- les lacunes en matière de compétences et la sous-utilisation des compétences
- les moyens limités des collectivités
- l'évolution démographique, notamment le vieillissement et la baisse du taux de natalité

Le défi stratégique du Ministère consiste à jouer un rôle efficace dans le renforcement du potentiel au Canada par le développement social et économique.



Il faut élaborer les politiques de manière que les Canadiens obtiennent des résultats concrets, notamment la croissance réelle de leur niveau de vie et l'amélioration des résultats sociaux et économiques pour les particuliers et les familles.

Contexte stratégique

Introduction

Autrefois, on jugeait que les politiques sociales et économiques tiraient chacune de leur côté. On croyait que les politiques économiques augmentaient la prospérité en faisant monter la productivité, tandis que les politiques sociales étaient axées sur la répartition de la richesse. Ainsi, l'efficacité et l'équité étaient envisagées comme des compromis. Cet ancien modèle de croissance économique a été remplacé par une nouvelle connaissance dynamique du mode de renforcement mutuel des stratégies économiques et sociales. Les pays où les chances sont réparties de manière uniforme ont tendance à croître plus rapidement. Ces pays sont également moins sensibles aux chocs économiques et s'y adaptent plus facilement. Les sociétés qui soutiennent leur croissance économique le font en axant leurs politiques sur la productivité, les compétences et l'apprentissage, un marché du travail efficace et des bases sociales solides.

Investissements

Les investissements dans le marché du travail et le développement social peuvent assurer la croissance économique à long terme. Ces investissements, sur toute une vie et dès la petite enfance, augmentent les capacités et l'éventail de possibilités qui s'offrent à tous. Ils sont donc essentiels pour que des gens ne se retrouvent pas inévitablement en situation défavorisée et d'exclusion.

Les craintes traditionnelles entourant l'emploi et la rémunération et les avantages sociaux insatisfaisants sont les principaux points des politiques du marché du travail. Du côté de l'apprentissage, on insiste sur l'accroissement des taux de scolarisation postsecondaire pour soutenir la prospérité sociale et économique. Toutefois, à moyen terme, le marché du travail va se resserrer. On devra donc trouver des moyens d'agrandir le bassin de travailleurs spécialisés et de répondre efficacement à la demande dans les principaux secteurs et les grandes régions.

Le resserrément du marché du travail offre de nouvelles possibilités aux entreprises et aux employeurs de faire appel à de nouvelles sources de travailleurs, comme les groupes sous-représentés. Ce resserrément peut également offrir aux employeurs de nouvelles possibilités pour investir davantage dans la requalification des travailleurs. Il augmente aussi l'importance d'investir dans l'apprentissage et l'alphabetisation des adultes et de promouvoir l'épargne pour les études postsecondaires et la poursuite des études jusqu'à ce niveau. À l'étranger, les économies dont le profil d'âge est avancé (p. ex., le Japon) qui vivent un resserrément extrême du marché du travail à cause de la croissance de la demande (p. ex., les États-Unis) montrent que la croissance économique nationale se rattache à chacun des objectifs entourant l'emploi, l'inclusion et la sécurité financière.

Le développement social se traduit également par des résultats économiques. Il aide les personnes à acquérir les outils dont elles ont besoin pour bien gérer les transitions et les difficultés que la vie leur réserve. Comme il est orienté vers la prévention et des solutions intégrées, il crée des gains d'efficacité et réduit le nombre d'interventions de redressement coûteuses.

En plus des avantages de la prospérité économique du Canada en général, ces investissements ouvrent la voie à l'inclusion sociale par l'augmentation du capital de personnes. Le Ministère a la possibilité de

INDICATEURS CONTEXTUELS DE RHDSC (suite)

INDICATEUR		NIVEAU	
Rémunération horaire par niveau de scolarité	Moyenne annuelle (2005)	Ensemble	20,90 \$
		Moins que le diplôme d'études secondaires	15,70 \$
		Diplôme d'études secondaires ou études postsecondaires incomplètes	18,30 \$
		Certificat ou diplôme postsecondaire	20,50 \$
		Grade universitaire	26,70 \$
Proportion des groupes démographiques 20-24 ans et 25-64 ans ayant le diplôme d'études secondaires	(2001)	20-24	75,0 %
		25-64	65,6 %
Proportion de Canadiens en âge de travailler (16 à 65 ans) se situant au niveau de littératie 2 ou au-dessous	(2003)		42 %
Taux de syndicalisation défini comme la proportion de travailleurs non agricoles régis par une convention collective (niveau national)	(2005)		32,2 %
Fréquence de la faiblesse du revenu – nombre et proportion de Canadiens à faible revenu (SFR après impôt)	(2004)	Ensemble des personnes	11,2 %
		Moins de 18 ans	12,8 %
		18-64 ans	11,7 %
		65 ans et plus	5,6 %
Proportion de ménages à faible revenu des régions métropolitaines de recensement qui demeurent dans des quartiers défavorisés	(2000)		11,9 %
Besoin impérieux de logement	(2001)		13,7 %

pratiques professionnelles favorables à la famille comme des services de garde en milieu de travail et des horaires de travail souples.

Les indicateurs de la qualité de vie révèlent que les collectivités évoluent à cause de l'urbanisation accrue et de la migration régionale d'est en ouest. De plus, les indicateurs mesurés dans 20 collectivités du Canada montrent un risque accru d'itinérance dans les collectivités canadiennes, peut-être à cause de la diminution des taux d'occupation des logements à louer et du nombre record de mises en chantier, d'abord destinées aux propriétaires. Sur le nombre de personnes à la recherche d'un logement à prix abordable, plus des deux tiers sont locataires⁶.

Malgré ces difficultés, le Canada présente une longue feuille de route pour l'action bénévole à l'intérieur des collectivités locales. La prospérité de la société civile du Canada se reflète dans la taille relativement grande et la diversité de son secteur sans but lucratif. En 2003, environ 161 000 organismes bénévoles et sans but lucratif ont été recensés au Canada, notamment des centres de jour, des clubs sportifs, des organisations d'artistes, des écoles privées, des hôpitaux et des banques alimentaires. Les organismes faisant partie du secteur privé et du secteur communautaire sans but lucratif sont des véhicules essentiels de bien-être et de participation des citoyens.

L'avenir socio-économique du Canada

La capacité des Canadiens à exploiter leurs capacités au maximum continuera d'être entravée par des variables comme l'éducation, le niveau de revenu, l'employabilité et les moyens à la disposition des collectivités. Pour saisir les possibilités offertes par la mondialisation, l'économie axée sur le savoir et l'évolution démographique, il faudra élaborer des politiques novatrices, collaborer avec divers partenaires et s'engager à atteindre des résultats concrets pour les Canadiens.

Le tableau ci-après présente une liste des principaux indicateurs contextuels susceptibles d'intéresser RHDSC. Ces indicateurs constituent la base de l'analyse de la démographie et du milieu économique présentée ci-dessus. La section Cadre de mesure du rendement contient d'autres détails sur les indicateurs contextuels et le cadre des indicateurs globaux.

INDICATEURS CONTEXTUELS DE RHDSC

INDICATEUR		NIVEAU	
Croissance démographique nette par source	(juillet 2004 à juillet 2005)	Total	0,93 %
		Accroissement naturel	0,32 %
Taux de dépendance de la population par groupe d'âge	(juillet 2005)	19 ans et moins	24,3 %
		65 ans et plus	13,1 %
PIB réel par habitant (dollars de 1997)	35 900 \$ (moyenne annuelle en 2005)	Total	37,3 %
		Par groupe d'âge (2005)	
Taux d'activité	15 ans et plus	67,2 %	
	15-24 ans	65,9 %	
Taux de chômage	25-54 ans	86,3 %	
	55 ans et plus	31,5 %	
	Par groupe d'âge (2005)		
	15 ans et plus	6,8 %	
	15-24 ans	12,4 %	
	25-54 ans	5,8 %	
	55 ans et plus	5,1 %	

À l'inverse, la croissance de la productivité du travail dans les entreprises canadiennes a ralenti considérablement de 2000 à 2003-2004, avant de rebondir légèrement et de se fixer à environ 1 % en 2005. La Banque du Canada estime que cette croissance devrait bientôt revenir à son taux habituel de 1,7 % par année⁵.

Depuis quelques années, le revenu des Canadiens augmente *continuellement*. Le revenu médian net s'est élevé dans la plupart des familles canadiennes en 2004, la forte croissance économique ayant favorisé des gains dans l'emploi, qui se sont traduits par une hausse des revenus gagnés sur le marché du travail. Les familles canadiennes de deux membres ou plus présentaient un revenu médian net de 54 100 \$, soit une hausse d'environ 2 % par rapport à 2003, après correction de l'inflation. Le revenu net n'a pas augmenté dans tous les types de familles. Dans les familles « moins jeunes », le revenu médian net est demeuré sensiblement le même, tout comme celui des personnes seules ou des célibataires.

Qualité de vie

La qualité de vie tient au bien-être des personnes dans leur famille et dans leur collectivité. Elle s'étend au-delà du bien-être matériel, notamment aux milieux culturels, municipaux et sociaux. De façon générale, le Canada garde la réputation internationale d'offrir une qualité de vie élevée à ses citoyens.

Néanmoins, environ 684 000 familles canadiennes appartenaient à des ménages à faible revenu en 2004 – 7,8 % du total des familles, soit une baisse par rapport à 8,5 % en 2003. En dépit des améliorations globales des niveaux de revenu, cinq groupes de Canadiens demeurent à risque élevé de toucher un faible revenu, en grande partie parce qu'ils vivent des périodes de chômage et de travail peu rémunéré fréquentes ou longues et ont tendance à montrer de faibles niveaux de compétence et de scolarisation. Voici ces groupes :

- les familles monoparentales où il y a au moins un enfant de moins de 18 ans;
- les personnes seules de 45 à 64 ans;
- les immigrants récents;
- les Autochtones;
- les personnes souffrant d'un handicap mental ou physique.

Parmi ces ménages à faible revenu, environ 865 000 enfants de 17 ans et moins, soit 12,8 % de l'ensemble des enfants, vivaient dans des familles à faible revenu en 2004. Ce taux était bien en deçà du sommet de 18,6 % atteint en 1996, mais légèrement en hausse par rapport au creux de 12,1 % enregistré en 2001.

Pour que les Canadiens puissent trouver et conserver un emploi, il faut les aider continuellement et leur faciliter l'acquisition de compétences. Ces solutions sont essentielles à la réduction du risque de faible revenu. Toutefois, lorsqu'on regarde l'avenir, l'excellent rendement de l'économie et du marché du travail du Canada en 2005 et les perspectives positives pour les années à venir se traduiront probablement par une élévation réelle du revenu de ces groupes.

La qualité de vie, c'est plus qu'avoir un emploi et un revenu décents. C'est aussi être en bonne santé en général, habiter un logement convenable, avoir des possibilités d'éducation et d'apprentissage, bénéficier des réseaux de soutien social et communautaire, se perfectionner, concilier le travail et la vie personnelle, éprouver un sentiment d'appartenance et mener une vie satisfaisante.

Pour de nombreuses familles dont les membres travaillent, la conciliation travail-vie personnelle demeure un problème. En 2003, 64,8 % des familles avaient deux revenus. En 2005, 67,2 % des femmes ayant des enfants de moins de six ans travaillaient. Pour de nombreuses mères seules au travail, il est assez difficile de travailler et de s'occuper de ses enfants. Les responsabilités entourant la garde des personnes âgées membres de la même famille, obligation qui revient le plus souvent aux femmes, créent également une pression supplémentaire, qui peut nuire à la santé et au bien-être des membres de la famille. Sans compter qu'elle modifie la structure de la famille, elle peut aussi entraîner une plus forte demande de

⁵ Banque du Canada, *Rapport sur la politique monétaire*, octobre 2005, p. 15.

population générale. D'ici 2017, le pourcentage d'Autochtones à l'échelle nationale augmentera légèrement et atteindra 4,1 %.

Au cours des 45 dernières années, la composition des familles a évolué et comprend de nouvelles définitions, notamment un nombre inégal d'unions de fait (tableau 1). Il y a plus de séparations et de divorces aujourd'hui qu'autrefois. Les taux de fécondité ont diminué, les mères attendent quelques années de plus avant d'avoir des enfants, et le nombre d'enfants dont les parents ne sont pas mariés est plus élevé de nos jours. Un nombre sans précédent d'enfants et d'adultes font partie de familles monoparentales ou reconstituées.

TABEAU 1 : INDICATEURS DE LA DIVERSIFICATION DES FAMILLES

	1961	1981	1991	2002
Indice synthétique de fécondité (nombre moyen de naissances par femme)	3,8	1,7	1,7	1,5
Âge moyen à un premier mariage				
Mariées	21,1	22,5	25,1	27,0
Mariés	24,0	24,6	27,0	29,0
Nombre de divorces sur 100 000 couples mariés	180	1180	1235	1050
Pourcentage de couples en union libre par rapport à l'ensemble des couples	--	6,4	11,2	16,4
Pourcentage d'enfants nés en dehors du mariage	4,5	16,7	28,6	36,6
Nombre de naissances chez les femmes âgées de 30 ans et plus par rapport au total des naissances	34,1	23,6	36,0	47,4
Pourcentage des familles monoparentales par rapport au total des familles ayant des enfants	11,4	16,6	20,0	25,0

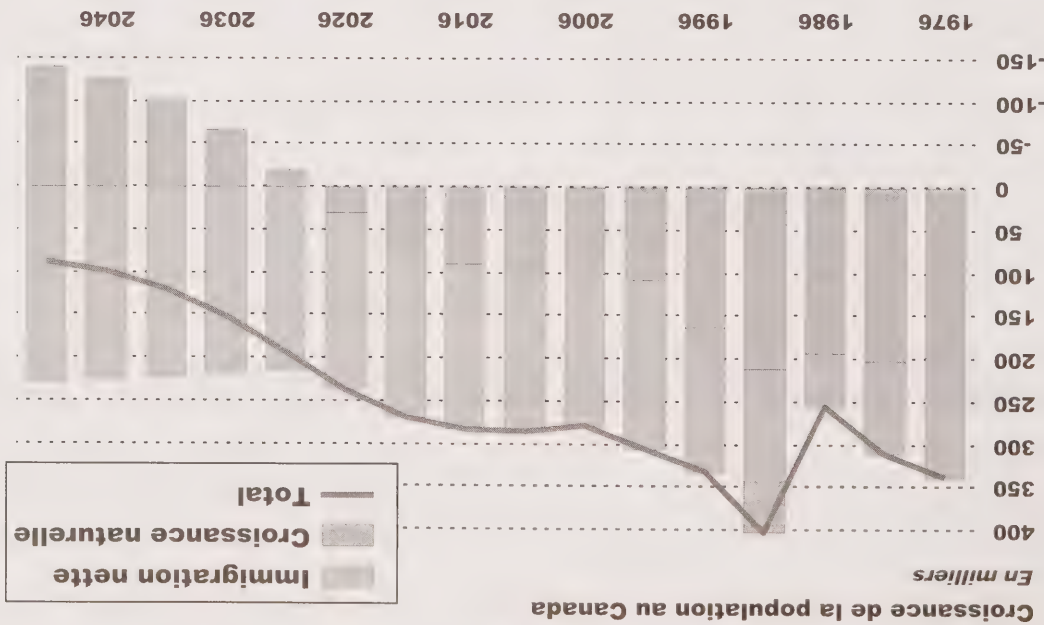
Source : Beajot, R., and Kerr, D. (2004). *Population Change in Canada*. Toronto: Oxford University Press.

Niveau de vie

De façon générale, le marché du travail et les milieux sociaux et économiques du Canada sont en bonne santé et laissent entrevoir un avenir positif pour les prochaines années. Le Canada s'est classé quatrième sur 177 pays pour l'indicateur du développement humain des Nations Unies en 2004, une vaste mesure qui comprend plusieurs résultats sociaux et économiques. Le produit intérieur brut (PIB) par habitant appartient aux premiers rangs des pays de l'Organisation de coopération et de développement économiques (OCDE) en 2004, la croissance de l'emploi depuis 2000 dépasse celle des partenaires du G-7, et le Canada a l'une des populations les plus scolarisées. Le rendement de l'économie et du marché du travail solide du Canada a fait augmenter le niveau de revenu des Canadiens et diminuer les taux de faible revenu.

Depuis le milieu des années 90, le Canada connaît une croissance économique vigoureuse, et l'évolution positive du niveau de vie des Canadiens est attribuable, dans une mesure non négligeable, à la hausse du taux d'emploi. En 2005, près de 223 000 emplois ont été créés au Canada, si bien que le taux d'emploi (le pourcentage des personnes de 15 ans et plus qui travaillent) est demeuré à 62,7 %, le plus haut niveau jamais enregistré. C'est ainsi que, depuis le milieu de la décennie 1990, la proportion que représente toute la population occupée a augmenté; en 2005, la moitié de la population avait un emploi. De plus, le PIB réel a crû de 2,9 % en 2005, soit au même rythme qu'en 2004, et on s'attend à une croissance semblable en 2006 et en 2007⁴. Le marché du travail du Canada devrait continuer de bien se porter au cours des prochaines années, et on s'attend à ce que le taux de chômage baisse encore.

FIGURE 2



La croissance de la population du Canada dépend de plus en plus de l'immigration. Entre 1991 et 2001, 220 000 personnes par année en moyenne sont arrivées au Canada. Les minorités visibles constituent désormais 13,4 % de la population, et on prévoit que leur représentation passera à 20 % d'ici 2017². De nombreux immigrants sont des travailleurs formés à l'étranger, qui proviennent d'un nombre croissant et variable de pays.

L'accroissement naturel de la population du Canada (le nombre de naissances, moins le nombre de décès) perd toujours de son importance et l'immigration, qui constitue désormais la principale source de croissance démographique, ne suffira pas à renverser cette tendance de sorte qu'on puisse répondre aux futurs besoins du marché du travail.

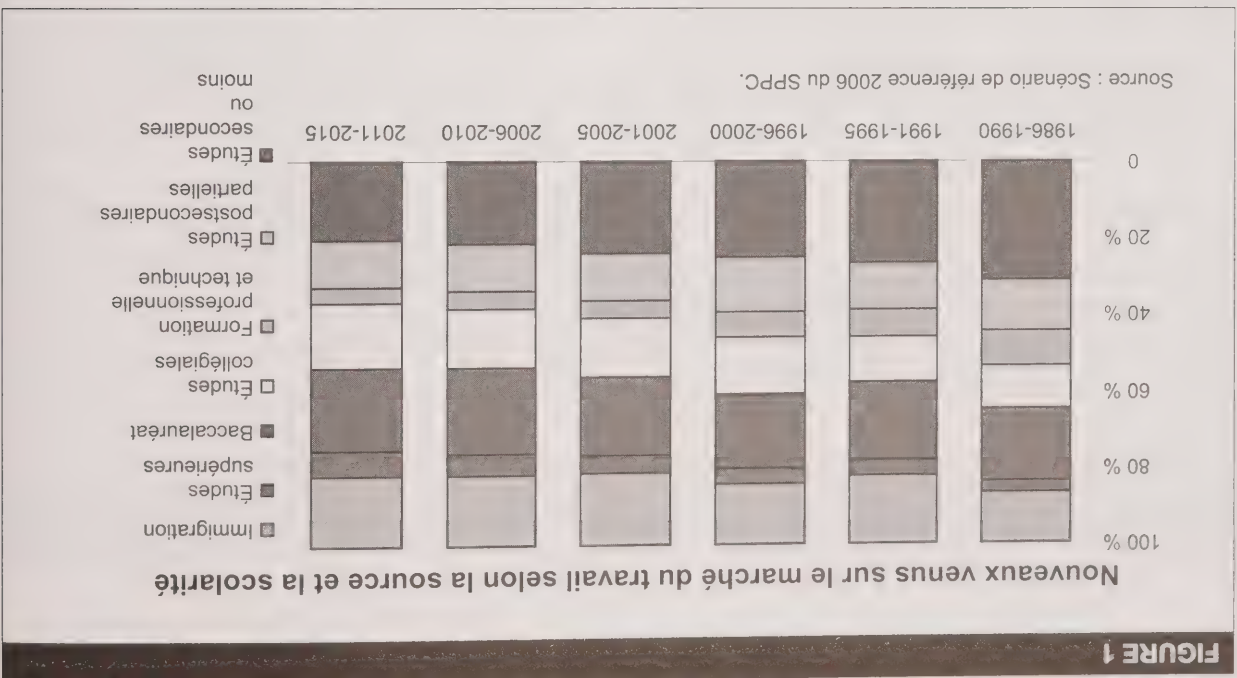
Autrefois, l'économie bénéficiait grandement de l'expansion de la main-d'œuvre et de la hausse continue du taux d'emploi. Faute de ces facteurs, le Canada devra de plus en plus compter sur la croissance de la productivité du travail pour améliorer son niveau de vie. Cette tendance sera exacerbée par le départ à la retraite imminent des personnes issues de l'explosion démographique. Les personnes âgées constituent le groupe d'âge dont l'expansion est la plus rapide au Canada : le pourcentage de la population de 65 ans et plus devrait passer de 13 % en 2005 à près de 24 % en 2031³. Bien que certains signes montrent que le Canada va s'adapter aux pressions de plus en plus fortes sur son système de santé et ses régimes publics de retraite, il se peut toutefois qu'on ait à encourager la participation et l'inclusion accrues des personnes âgées dans la collectivité.

Les autres tendances démographiques concernent la collectivité autochtone et la nature évolutive des familles canadiennes. En 2001, il y avait tout juste un peu plus d'un million d'Autochtones au Canada, soit 3,4 % de la population. Le taux de fécondité des Autochtones est environ 1,5 fois supérieur à celui de la

² Division de la démographie de Statistique Canada (2005), *Projections de la population des groupes de minorités visibles, Canada, provinces et régions, 2001 à 2017*, n° 91-541-XIF au catalogue.

³ Statistique Canada, *Projections démographiques pour le Canada, les provinces et les territoires (2005 à 2031)*, n° 91-520-XIF au catalogue, 2005.

exigeront un certain niveau d'études postsecondaires. Cette augmentation progressive des besoins en compétences sera généralement compensée par une hausse du niveau de scolarité des éventuels travailleurs, puisqu'à peu près les deux tiers des nouveaux débutants auront un certificat d'une école de métiers, un diplôme collégial ou un diplôme universitaire (figure 1).



Pour répondre à la demande de travailleurs spécialisés sur le marché du travail et atténuer l'émigration de travailleurs spécialisés, il faut améliorer l'intégration des travailleurs formés à l'étranger. Selon de récentes études, une hausse de 1 % du taux d'alphabétisation des adultes produirait une augmentation globale de 2,5 % de la productivité du travail et un bond de 1,5 % du PIB par habitant. Ces statistiques favorisent le déploiement d'efforts plus considérables encore pour encourager l'apprentissage chez les adultes, notamment les programmes d'alphabétisation et d'apprentissage.

Les progrès dans les technologies de l'information et des communications donnent à l'industrie et au gouvernement un moyen d'innover dans la prestation de services. On peut miser sur l'utilisation judicieuse d'Internet et de l'informatique pour réduire les coûts et améliorer le mode de prestation des services gouvernementaux aux Canadiens.

On peut avoir recours à la technologie pour faire progresser des objectifs sociaux et économiques, mais la réalisation de ces objectifs n'est possible que par la collaboration de tous les intervenants personnes, gouvernements, organismes communautaires, secteurs d'activité. Il faut aussi songer à l'accès à Internet.

Évolution démographique

Le profil démographique du Canada subira la nette influence des faibles taux de fécondité et de l'accroissement de l'espérance de vie. La croissance de la population au Canada a ralenti au cours des dernières années, et cette tendance se poursuivra vraisemblablement dans un avenir prochain (figure 2).

Serge Coulombe, Jean-François Tremblay et Sylvie Marchand, *Performance en littératie, capital humain et croissance dans quatorze pays de l'OCDE, 2004.*

VUE D'ENSEMBLE DE LA PLANIFICATION

Contexte social et économique

L'avenir des politiques, des programmes et des services de développement social et humain au Canada subira l'influence d'un grand nombre de facteurs, et un grand nombre de personnes, d'organismes et de gouvernements contribueront à façonner cet avenir. Chacun devra tenir compte d'un minimum de facteurs : la mondialisation, l'évolution technologique dans une société du savoir, l'évolution démographique, le niveau et la qualité de vie.

Mondialisation

Aujourd'hui, la mondialisation influe sur la constitution sociale et économique du Canada. Avec la croissance du commerce international, l'émergence d'économies comme celles de la Chine et de l'Inde, l'accroissement de la mobilité des biens et des personnes et les nouvelles technologies de communication, le monde semble se rétrécir plus que jamais, si bien que le Canada et sa population auront de nouveaux défis à relever et de nouvelles occasions à saisir.

La mondialisation procure de nombreux avantages, notamment un grand nombre de clients susceptibles d'acheter des biens et des services provenant du Canada et un grand nombre de sources d'importation de biens et de services étrangers. Par ailleurs, la mondialisation se traduit aussi par une concurrence intérieure et internationale accrue.

L'effet de la mondialisation sur le marché du travail est évident. Bien que le taux d'emploi soit élevé depuis quelques années, l'emploi dans le secteur de la fabrication a repris sa tendance à la baisse à long terme : il représente un pourcentage décroissant de l'emploi total, même qu'environ 85 000 travailleurs ont perdu leur emploi en 2005. Cette situation reflète en partie la forte valorisation du dollar canadien par rapport au dollar américain depuis quelques années et l'influence des économies en développement. Par ailleurs, les investissements en capital dans la production et l'exportation de ressources énergétiques, surtout dans l'exploitation des sables pétroliers, ainsi que pour la préparation des Jeux olympiques et paralympiques d'hiver de 2010 à Vancouver, contribuent à la croissance nette de l'emploi et à la vigueur du marché du travail dans les provinces de l'Ouest.

Les changements à grande échelle ont une incidence sur les collectivités qui dépendent fortement des employeurs ou des secteurs traditionnels. Les entreprises locales n'ont guère d'autre choix de réagir aux pressions de la mondialisation qu'en modifiant leur mode d'exploitation.

Toutefois, le Canada devrait généralement maintenir une bonne santé socio-économique au cours des prochaines années. La vigueur du marché du travail, le faible taux de chômage, le bon capital social et la viabilité des institutions (comme les familles et les écoles) sont tous des facteurs qui influent de plus en plus sur notre relation avec les autres pays et qui amènent le marché du travail, les familles canadiennes et parfois des collectivités entières à s'adapter.

Évolution technologique et société du savoir

L'évolution technologique continue de transformer la façon dont les Canadiens vivent et travaillent. L'économie axée sur le savoir a des conséquences directes sur les compétences et les connaissances exigées des Canadiens et sur leur participation à l'apprentissage permanent.

Il est essentiel d'établir un équilibre entre les compétences que les jeunes et les immigrants apportent au marché du travail et les futurs besoins des employeurs. Au cours des dix prochaines années, environ les deux tiers des nouveaux emplois qui seront disponibles au Canada seront des postes de gestion ou

Le tableau ci-dessous reflète la combinaison des ressources humaines et financières prévues de Ressources humaines et Développement des compétences Canada et de Développement social Canada.

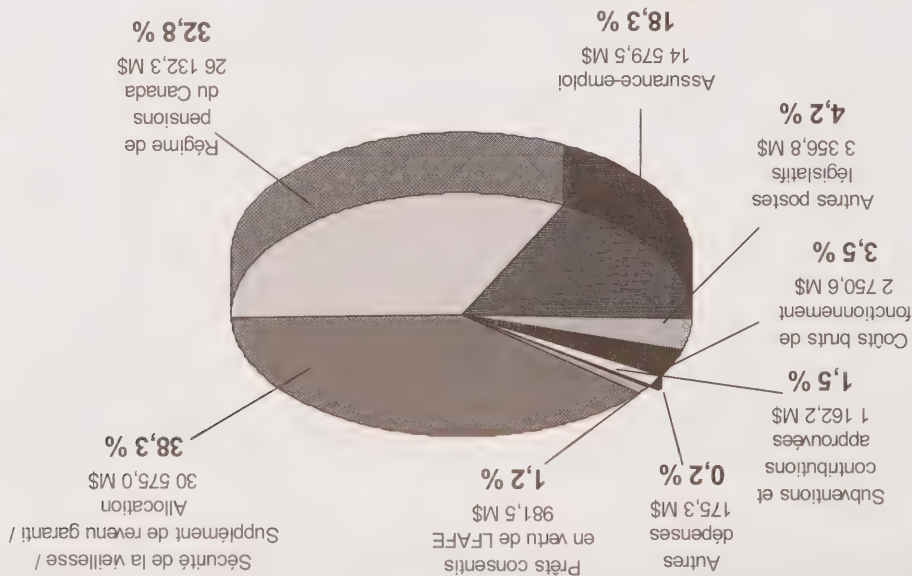
TABEAU 1 : RESSOURCES HUMAINES ET DÉVELOPPEMENT SOCIAL CANADA - RESSOURCES FINANCIÈRES ET RESSOURCES HUMAINES

Dépenses prévues			
	2006-2007	2007-2008	2008-2009
Ressources financières (en millions de \$)			
Dépenses de fonctionnement brutes	2 750,6	2 695,8	2 679,8
Subventions et contributions non législatives	1 162,2	1 085,7	1 004,6
Paielements de transferts législatifs	33 883,5	35 257,3	36 731,0
Total des dépenses brutes	37 796,3	39 038,8	40 415,4
Prêts consentis en vertu de la Loi fédérale sur l'aide financière aux étudiants	981,5	769,1	560,8
Prestations du RPC	26 132,3	27 496,9	28 917,7
Assurance-emploi (Partie I) - Prestations de revenu	12 442,0	13 058,0	13 661,0
Assurance-emploi (Partie II) - Prestations d'emploi et mesures de soutien	2 137,5	2 143,1	2 143,6
Paielements des rentes sur l'Etat et du régime d'assurance de la fonction publique	48,3	45,4	42,7
Total	79 537,9	82 551,3	85 741,2
Autres frais ministériels			
Créances douteuses de l'assurance-emploi	57,0	60,0	62,0
Coûts d'administration de l'assurance-emploi pour d'autres ministères fédéraux	64,6	67,5	62,5
Coûts d'administration Régime de pensions du Canada pour d'autres ministères fédéraux	131,1	132,8	133,9
Recouvrements - Indemnisation des accidentés	(77,4)	(78,4)	(80,4)
Total consolidé	79 713,2	82 733,2	85 919,2
Ressources humaines			
Equivalents temps plein	24 274	23 661	23 513

Profil des dépenses prévues pour 2006-2007

TOTAL GÉNÉRAL :

79 713,2 M\$



RESSOURCES HUMAINES ET DÉVELOPPEMENT SOCIAL – DÉPENSES BRUTES

Dépenses budgétaires	1 014,5
Coûts nets de fonctionnement	
Ajouter les sommes recouvrées	
relativement :	
au régime de pensions du Canada	246,8
au compte d'assurance-emploi	1 411,9
à l'indemnisation des accidentés du travail	77,4
1 736,1	
Coûts bruts de fonctionnement	
Subventions et contributions autorisées	1 162,2
Total des dépenses brutes	3 912,8
Autres – Indemnisation des accidentés et coûts et montants recouvrés du Compte d'a.-e.	175,3
et du RPC	
Dépenses non budgétaires	
Prêts consentis en vertu de la Loi fédérale sur l'aide financière aux étudiants (LFAFE)	981,5

PAIEMENTS DE TRANSFERT LÉGISLATIFS

Subventions et contributions :	
Programme de la Sécurité de la vieillesse	30 575,0
Autres paiements législatifs :	
Prêts canadiens aux étudiants	399,6
Subvention canadienne pour l'épargne-études	575,0
Bon d'études canadien	45,0
Programme de protection des salaires	28,7
Prestation universelle pour la garde d'enfants	1 610,0
Garde d'enfants - Ententes prov.-terr.	650,0
Autres dépenses	0,2
Total	33 883,5
Prestations du Régime de pensions du Canada	26 132,3
Prestations d'assurance-emploi	
Partie I	12 442,0
Partie II	2 137,5
Autres comptes à fins déterminées	48,3 ^a
Total des paiements de transfert législatifs	74 643,6

^a Ce montant comprend les paiements relatifs au Compte des rentes sur l'Etat et au Fonds d'assurance de la fonction publique.

PROFIL DES DÉPENSES

Combinant les ressources de Ressources humaines et Développement des compétences Canada et de Développement social Canada, le ministère des Ressources humaines et du Développement social a des dépenses prévues supérieures à 79 milliards de dollars, dont 75 milliards de dollars (presque 95 %) sont des prestations directes versées aux Canadiens par l'assurance-emploi, le Régime de pensions du Canada, la Sécurité de la vieillesse, les prêts accordés en vertu de la *Loi fédérale sur l'aide financière aux étudiants* et d'autres paiements de transfert législatifs. Le Ministère a prévu dépenser 1,2 milliard de dollars de subventions et contributions votées, 33,9 milliards de dollars de subventions et contributions législatives et 2,1 milliards de dollars en vertu de la partie II de la *Loi sur l'assurance-emploi*.

La stratégie financière de Service Canada établit que les fonds législatifs (assurance-emploi, RPC, SV et contributions votées pour la réalisation des programmes désignés) seront affectés chaque année par RHDSC.

Le 6 février 2006, par une série de décrets pris suivant la Loi sur les restructurations et les transferts d'attributions dans l'administration publique, le contrôle et la supervision de l'administration publique fédérale à Développement social Canada ont été transférés au ministre des Ressources humaines et du Développement des compétences. Les pouvoirs, les attributions et les fonctions du ministre du Développement social ont été transférés au ministre des Ressources humaines et du Développement des compétences, et ce ministre a reçu le titre de ministre des Ressources humaines et du Développement social. Il est également responsable de la Société canadienne d'hypothèques et de logement.

Tant que la nouvelle loi ministérielle n'entrera pas en vigueur, la ministre en titre se fonde sur les dispositions de la Loi sur le ministre des Ressources humaines et du Développement des compétences et de la Loi sur le ministre du Développement social pour l'exercice de certains pouvoirs.

La Loi sur le ministre des Ressources humaines et du Développement des compétences définit les pouvoirs, les attributions et les fonctions du ministre de RHDSC, du ministre du Travail et de la Commission de l'assurance-emploi du Canada. RHDSC a pour mandat d'améliorer le niveau de vie et la qualité de vie de tous les Canadiens en faisant la promotion d'une main-d'œuvre mobile et hautement spécialisée sur un marché du travail efficace et inclusif. La ministre de RHDSC supervise de façon générale le Régime d'assurance-emploi, tandis que l'administration de la Loi sur l'assurance-emploi relève de la Commission de l'assurance-emploi du Canada.

La Loi sur le ministre des Ressources humaines et du Développement des compétences prévoit la nomination d'un ministre du Travail responsable du Code canadien du travail, de la Loi sur l'équité en matière d'emploi et d'autres lois sur la rémunération et les conditions de travail. Cette loi constitutive prévoit que le ministre du Travail utilise les services et les installations du Ministère. Elle établit également le mandat du ministre du Travail, qui est de promouvoir des milieux de travail sécuritaires, sains, justes, stables, coopératifs et productifs.

La Loi sur le ministre du Développement social Canada définit les pouvoirs, les attributions et les fonctions du ministre du Développement social Canada (DSC). DSC a pour mandat de promouvoir le bien-être social et la sécurité. En exerçant les pouvoirs et en accomplissant les tâches et les fonctions que prévoit cette loi, le ministre est responsable de lois comme celle du Régime de pensions du Canada, la Loi sur la sécurité de la vieillesse, la Loi sur le Conseil national du bien-être social et la Loi sur la prestation universelle pour la garde d'enfants.

Service Canada fonctionne dans le mandat législatif et le cadre actuel des lois constitutives de Ressources humaines et Développement des compétences Canada et de Développement social Canada. Son mandat est de collaborer avec les ministères fédéraux, les autres paliers de gouvernement et les fournisseurs de services communautaires afin d'offrir des services par guichet unique. Service Canada n'est pas une entité légale distincte, mais il jouit de pouvoirs délégués pour l'exécution de son mandat et l'exercice de ses fonctions.

Modifications apportées à l'Architecture des activités de programmes 2005-2006

Les fonctions de soutien des politiques et des programmes ont été regroupées et forment désormais la nouvelle activité de programmes Recherche en politiques et communications. Celle-ci contribue à la réalisation du nouveau résultat stratégique « Politiques qui répondent aux besoins des Canadiens en matière de capital humain et de développement social ».

Les activités de programmes Marché du travail, Compétences en milieu de travail et Apprentissage ont été regroupées pour contribuer à la réalisation du résultat stratégique « Productivité et activité améliorées des Canadiens par des marchés du travail efficaces et inclusifs, des milieux de travail concurrentiels et l'accès à l'apprentissage ».

Les anciennes activités de programmes Prestations d'assurance-emploi et Programmes d'emploi ont été regroupées sous la nouvelle activité de programmes Marché du travail.

Les activités de programme Investissement social, Enfants et familles et Logement et sans-abri ont été regroupées et contribuent désormais à la réalisation de l'objectif stratégique de l'amélioration de la sécurité du revenu, de l'accès aux possibilités et du bien-être pour les personnes, les familles et les collectivités.

L'ancienne activité de programmes de l'AAP Investissements sociaux a été divisée en deux activités de programmes : Investissement social et Enfants et familles.

Le résultat de la prestation de services dépend maintenant de trois activités de programmes dans le cadre du mandat général de Service Canada :

1. Services transparents axés sur le citoyen
2. Intégrité
3. Un gouvernement qui favorise la collaboration et le réseautage

Vision: Un Canada fort et compétitif qui aide les citoyens à faire des choix qui leur permettent de vivre une vie productive et enrichissante.

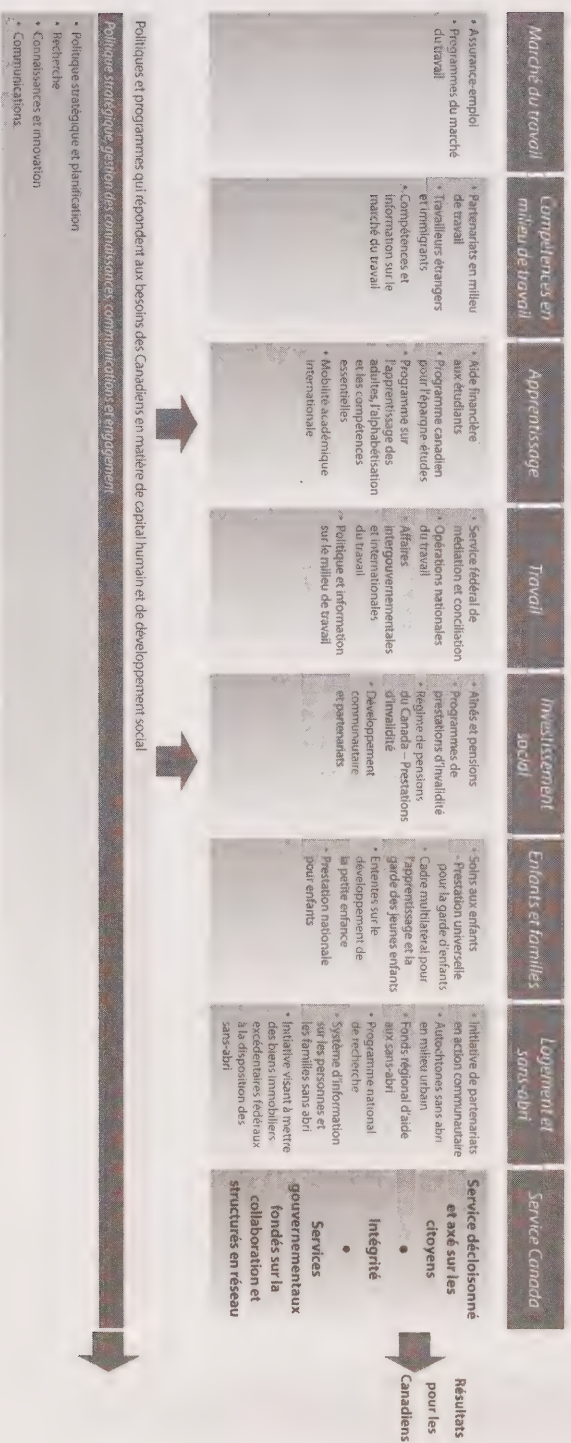
Mission: Élaborer des politiques qui font du Canada une société où tous peuvent participer et veiller à ce que tous les citoyens puissent utiliser leurs talents, compétences et ressources afin de bénéficier à tout le pays. Le Ministère crée des programmes et appuie des initiatives qui aident les Canadiens à investir en eux pour traverser les transitions de leur vie : des familles avec des enfants aux aînés, de l'école au marché du travail, d'un emploi à un autre, du chômage à l'emploi, de la population active à la retraite. Il offre aussi des services axés sur les citoyens en garantissant les principes d'intégrité, d'engagement et d'excellence.

Productivité et participation canadiennes accrues par des marchés du travail efficaces et inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage.

Milieux de travail sécuritaires, sains, équitables, stables, productifs, où règne la coopération, et normes internationales du travail efficaces.

Amélioration de la sécurité du revenu, accès aux possibilités et mieux être des personnes, des familles et des collectivités.

Améliorer les résultats des Canadiens grâce à l'excellence du service.



Résultats stratégiques

Les programmes et les services de RHDSC sont conçus pour produire des résultats diversifiés dans la société et sur le marché du travail. On compte cinq résultats stratégiques, qui constituent la structure de présentation des plans, des priorités et des ressources dans le présent rapport :

- Politiques et programmes qui répondent aux besoins des Canadiens en matière de capital humain et de développement social
- Productivité et participation canadiennes accrues par des marchés du travail efficaces et inclusifs, des milieux de travail compétitifs et l'accès à l'apprentissage
- Milieux de travail sécuritaires, sains, équitables, stables, productifs, où règne la coopération, et normes internationales du travail efficaces
- Amélioration de la sécurité du revenu, accès aux possibilités et mieux être des personnes, des familles et des collectivités
- Améliorer les résultats des Canadiens grâce à l'excellence du service

Le diagramme de l'Architecture des activités de programmes (AAP) ci-après schématise le nouveau ministère. Les modifications apportées aux résultats stratégiques et aux activités de programmes de l'AAP sont décrites ci-dessous. Celles qui ont été apportées aux sous-activités et aux sous-sous-activités sont décrites à la section *Analyse des plans, des priorités et des activités des programmes selon les résultats stratégiques* pour chaque activité de programmes. La section *Autres points d'intérêt* présente un aperçu général.

RHDSC encourage et maintient la stabilité des relations industrielles et la sécurité et l'efficacité des milieux de travail de compétence fédérale. Le Ministère favorise également l'harmonie dans les relations syndicales-patronales, effectue des recherches sur la main-d'œuvre et met en œuvre des accords internationaux sur la main-d'œuvre.

Si on veut que les Canadiens disposent des outils nécessaires pour être pleinement présents sur le marché du travail et dans l'économie axée sur le savoir, il faut qu'une multitude de partenaires prennent une part active à ce qui se fait et que le Ministère serve d'agent catalyseur. Il faut aussi une collaboration avec les provinces et les territoires, compte tenu des responsabilités partagées pour un grand nombre de politiques et de programmes ministériels. RHDSC travaille de près avec les partenaires provinciaux et territoriaux et il cultive des relations déjà établies par les tribunes multilatérales et bilatérales en place. Les employeurs et les syndicats jouent un grand rôle pour les investissements dans les compétences en milieu de travail. La promotion du bien-être socio-économique exige également la collaboration du secteur bénévole et des organismes sans but lucratif, des partenaires en apprentissage, des groupes communautaires (y compris les communautés minoritaires de langue officielle) et du secteur privé pour que soient élaborés des programmes intégrés et que les Canadiens bénéficient de renseignements et de services. RHDSC travaille avec de nombreux partenaires internationaux pour s'inspirer de leurs approches et de leurs pratiques exemplaires et ainsi optimiser la participation des Canadiens au développement social et économique.

Service Canada

Service Canada procure un point d'accès unique aux citoyens voulant obtenir des services du gouvernement fédéral. Cette initiative a comme point de départ ce que les Canadiens ont dit vouloir obtenir de leur gouvernement et les « pratiques exemplaires » en excellence du service au Canada et à l'étranger. À en juger par l'expérience d'autres secteurs de compétence, le Canada a une feuille de route manifeste et Service Canada a tiré parti de plus d'une décennie de travaux au gouvernement canadien pour améliorer la prestation des services aux Canadiens.

L'organisme s'est chargé, au nom des ministères et organismes fédéraux, de fournir un nombre croissant de services et de prestations et de donner un choix et un accès meilleurs aux Canadiens. Aujourd'hui, son réseau de prestation de services compte 433 points de service dans des localités disséminées sur le territoire, un service national 1 800 O-Canada qui renseigne sur tous les services fédéraux, 23 autres centres d'appels en réseau et une gamme de services en ligne à <http://www.serviccanada.gc.ca/fr/accueil.html>

Service Canada collabore avec divers ministères et organismes fédéraux à la prestation de services en leur nom et trouve de nouvelles possibilités de former des partenariats avec d'autres ministères ou organismes, d'autres paliers de gouvernement et des intervenants communautaires afin d'accroître la qualité des services aux Canadiens et la rentabilité des programmes et des services. Il a nettement réussi et continuera à améliorer les services offerts grâce à un réseau étendu de services au comptoir, à un réseau intégré de centres d'appels rendant une grande diversité de services et à des applications en ligne.

INTRODUCTION

Le ministère des Ressources humaines et du Développement social du Canada (RHDSC) a été créé le 6 février 2006 par la fusion des anciens ministères Ressources humaines et Développement des compétences Canada et Développement social Canada. RHDSC a un vaste mandat social et économique qui concerne tous les Canadiens. Le Ministère est chargé d'offrir aux Canadiens les outils nécessaires pour se démarquer et prospérer en milieu de travail et, à cette fin, leur offrir des possibilités de formation et d'apprentissage, des conditions de travail et des relations syndicales-patronales saines et productives, de même que des politiques, des programmes et des services favorisant le mieux-être social des personnes, des familles et des collectivités, et leur participation à la société et à l'économie.

RHDSC a pour vision un pays fort et concurrentiel où chacun peut faire les choix qui lui permettent de mener une vie productive et enrichissante.

À cette fin, le Ministère élabore des politiques qui font en sorte que le Canada soit une société à laquelle tous peuvent participer et où chacun peut mettre ses talents, ses compétences et ses ressources au service de l'ensemble du pays. Le Ministère crée des programmes et soutient des initiatives qui permettent aux Canadiens de s'investir et de vivre toutes les transitions que la vie leur réserve — passage de la vie familiale à la vie de personne âgée, transition de l'école au travail, changement d'emploi, passage du chômage à l'emploi et du marché du travail à la retraite — et il offre un service axé sur les citoyens en faisant preuve d'intégrité, d'engagement et d'excellence.

Ressources humaines et Développement social

RHDSC compte plus de 24 000 employés dans la région de la capitale nationale et dans les bureaux régionaux de l'ensemble du Canada, et plus de 20 000 d'entre eux sont affectés à Service Canada. Pour remplir ses fonctions, RHDSC offre des programmes et des services à des millions de Canadiens. Il assure un soutien du revenu aux Canadiens en offrant des prestations prévues dans des programmes adoptés par le Parlement comme le Programme de la sécurité de la vieillesse et tout l'éventail des prestations du Régime de pensions du Canada. De plus, l'assurance-emploi sert de revenu d'appoint temporaire aux Canadiens sans emploi, et des programmes et des services d'emploi les aident à se préparer à l'emploi, à en trouver un et à le garder.

RHDSC fait la promotion de l'apprentissage permanent en encourageant le développement des compétences en milieu de travail au Canada et en élaborant et en diffusant des données, des renseignements et des connaissances sur le marché du travail. Le Ministère investit également dans l'apprentissage en facilitant l'accès à l'aide financière pour les études postsecondaires et pour les programmes d'apprentissage pour les adultes; il encourage l'apprentissage en soutenant les programmes qui servent à éliminer les obstacles non financiers à l'apprentissage et à l'alphabétisation des adultes et au développement de la petite enfance.

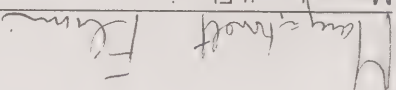
Grâce aux initiatives, aux politiques et aux programmes sociaux de RHDSC les enfants et leur famille, les personnes âgées, les personnes handicapées et les autres personnes en difficulté dans la société bénéficient du soutien, des connaissances et des renseignements dont ils ont besoin pour maintenir leur bien-être et mieux participer à la vie sociale et professionnelle. Ainsi, la nouvelle Prestation universelle pour la garde d'enfants offre un choix et une marge de manœuvre aux personnes et aux familles compte tenu des besoins et de la situation de chacun. La Prestation fiscale canadienne pour enfants contribue à alléger les coûts pour les familles admissibles qui ont des enfants et la Prestation universelle pour la garde d'enfants vise à aider les familles canadiennes qui cherchent à concilier leur travail et leur vie familiale en leur offrant une aide financière directe, quel que soit le type de service de garde qu'elles choisissent.

APERÇU DU MINISTÈRE DES RESSOURCES HUMAINES ET DU DÉVELOPPEMENT SOCIAL



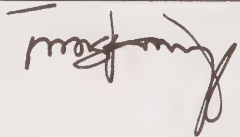
Déclaration de la direction

Les plans, les priorités, les dépenses prévues et les mesures du rendement à l'appui de l'initiative Service Canada sont présentées fidèlement dans le *Rapport sur les plans et les priorités 2006-2007* de Ressources humaines et Développement social Canada.


Maryan Fiumian
Administratrice générale de Service Canada et sous-ministre
déléguée, Ressources humaines et Développement social

Déclaration de la direction

Les plans, les priorités, les dépenses prévues et les mesures du rendement à l'appui du programme du travail sont présentés fidèlement dans le *Rapport sur les plans et les priorités 2006-2007* de Ressources humaines et Développement social Canada.



Munir A. Sheikh

Sous-ministre du Travail et sous-ministre délégué,
Ressources humaines et Développement social

Déclaration de la direction

Je soumetts, en vue de son dépôt au Parlement, le *Rapport sur les plans et les priorités 2006-2007* de Ressources humaines et Développement social Canada.

Ce document a été préparé conformément aux principes d'établissement de rapports contenus dans le Guide pour la préparation de la partie III du Budget des dépenses : Rapports sur les plans et priorités.

- Il décrit fidèlement les plans et les priorités de l'organisation. Le document est complet et exact.
- Il respecte les principes et les exigences décrits dans les lignes directrices du Secrétariat du Conseil du Trésor.
- Les plans et les priorités du Ministère sont fondés sur l'architecture des activités de programmes (AAP) approuvée pour 2007-2008; cependant, à titre comparatif, le Ministère utilise l'AAP approuvée pour 2006-2007 de Ressources humaines et Développement social Canada et de Développement social Canada pour présenter ses renseignements financiers.
- Il fournit une base de reddition de comptes pour les résultats réalisés au moyen des ressources et des pouvoirs qui lui sont confiés.
- Il rend compte des finances en se fondant sur les prévisions approuvées de dépenses du Secrétariat du Conseil du Trésor.

Janice Charette
Sous-ministre
Ressources humaines et Développement social

Le Programme du Travail contribue au bien-être social et économique de tous les Canadiens. Il joue un rôle prépondérant dans la vie professionnelle des Canadiens car il veille à ce qu'ils bénéficient de milieux de travail sains, sécuritaires, justes, stables, coopératifs et productifs.

Le Programme du Travail joue également un rôle de chef de file dans la promotion des droits fondamentaux des travailleurs à l'échelle internationale, ce qui favorise une croissance équitable et la stabilité sociale dans les pays en voie de développement.

Un milieu de travail sain profite aux travailleurs, à leurs familles, à leurs employeurs et à l'économie. Le Programme du Travail préconise des milieux de travail sains et sécuritaires par la consultation, la recherche, le partage d'information, la coopération et la collaboration dans le cadre de projets mixtes entre les différentes administrations selon le cas.



Nos engagements portent sur les conventions collectives, les services de protection contre les incendies, la santé et la sécurité, les normes du travail, l'équité en matière d'emploi, la coopération internationale dans le domaine du travail et d'autres questions relatives au milieu de travail, qu'il s'agisse de la formulation d'une politique du travail ou de la communication de renseignements sur le travail.

Le Programme du Travail est chargé de l'application de deux lois fondamentales qui contribuent à l'instauration de milieux de travail équitables, sécuritaires et représentatifs – le *Code canadien du travail* et la *Loi sur l'équité en matière d'emploi*. Nos principaux engagements pour l'année à venir sont l'examen de la Partie III (Normes du travail) du *Code canadien du travail* et la mise en place du Programme de protection des salariés. Notre objectif est de moderniser la législation fédérale régissant le travail de manière qu'elle réponde davantage aux besoins des employés et des employeurs dans l'économie d'aujourd'hui et protège les travailleurs qui sont les plus vulnérables en cas de faillite.

Je continuerai de travailler avec l'honorable Diane Finley, ministre des Ressources humaines et du Développement social, et avec mes collègues, afin de bâtir un pays plus prospère et plus concurrentiel. Le Canada est un pays prospère qui a un potentiel illimité. Le 21^e siècle offre d'innombrables possibilités et le meilleur est encore à venir.

L'honorable Jean-Pierre Blackburn, C.P., député
Ministre du Travail

Le portefeuille de Ressources humaines et Développement social Canada est l'un des plus dynamiques et diversifiés du gouvernement fédéral, car il concerne la vie des Canadiens sous de nombreux aspects. Les programmes, les politiques et les partenariats du Ministère ouvrent de nouvelles possibilités et offrent des services permettant aux Canadiens de toutes les régions d'atteindre leur plein potentiel. Ce faisant, le Ministère contribue à bâtir un Canada prospère et concurrentiel.



Selon moi, le soutien du bien-être économique et social des particuliers, des familles et des collectivités, la promotion de la main-d'œuvre canadienne et le souci de notre milieu d'apprentissage sont essentiels au succès du Canada au XXI^e siècle et après.

Le 23 janvier, les Canadiens ont élu un nouveau gouvernement. Celui-ci a des positions claires et se concentre sur ses cinq priorités : l'imputabilité, la réduction des taxes, la criminalité, la garde des enfants et les soins de santé. Le budget de 2006 indique de quelle façon notre gouvernement et notre ministère offriront une aide considérable aux enfants et aux familles, investiront dans les compétences et l'apprentissage et s'engageront à consulter les provinces et les territoires, les citoyens et les intervenants. Je suis très fière qu'on m'ait confié ce mandat, qui fait partie intégrante du programme de priorités du gouvernement. Le présent rapport contient nos objectifs, les initiatives et les activités qui nous permettront de les atteindre avec les résultats que nous prévoyons obtenir en 2006-2007.

Je vais continuer de travailler en collaboration avec l'honorable Jean-Pierre Blackburn, ministre du Travail, et Mme Lynne Velich, secrétaire parlementaire. Je suis également enthousiasmée à l'idée de travailler avec tous nos partenaires, y compris les provinces, les territoires et les intervenants, pour obtenir des résultats au service des Canadiens.

L'un de nos objectifs est de mieux offrir les programmes et les services par l'intermédiaire de Service Canada. Les Canadiens sont très clairs : ils veulent des services qu'ils peuvent trouver, obtenir et utiliser facilement. Ils s'attendent également à ce que les personnes qui répondent à leurs questions le fassent avec empressement, avec rapidité et en fonction de leurs besoins. Service Canada est synonyme de service supérieur, de simplicité et de choix. Nous veillerons à ce que Service Canada rende service à l'ensemble des Canadiens.

En tenant notre engagement et en travaillant selon nos principes, nous nous efforcerons de respecter les plus hautes normes d'intégrité, d'efficacité et d'imputabilité en matière de service à la population. Le Canada est un pays prospère. Nos efforts seront centrés sur le maintien de cette prospérité aujourd'hui et demain.

*L'honorable Diane Finley, C.P., députée
Ministre des Ressources humaines et du Développement social*

MESSAGES DES MINISTRES



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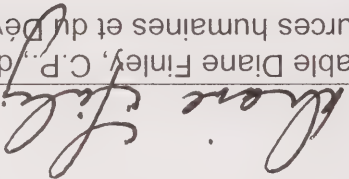
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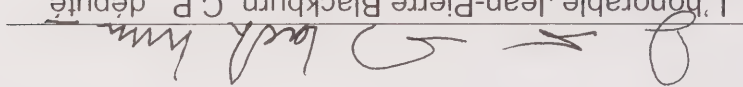
RESSOURCES HUMAINES ET DÉVELOPPEMENT SOCIAL CANADA

Budget des dépenses
2006-2007

Rapport sur les plans et les priorités

Approuvé par :


L'honorable Diane Finley, C.P., députée
Ministre des Ressources humaines et du Développement social


L'honorable Jean-Pierre Blackburn, C.P., député
Ministre du Travail

Les documents budgétaires

(chaque année, le gouvernement établit son budget des dépenses, qui présente l'information à l'appui des autorisations de dépenser demandées au Parlement pour l'affectation des fonds publics. Ces demandes d'autorisations sont présentées officiellement au moyen d'un projet de loi de crédits déposé au Parlement. Le budget des dépenses, qui est déposé à la Chambre des communes par le président du Conseil du Trésor, comporte trois parties :

Partie I – Plan de dépenses du gouvernement présente un aperçu des dépenses fédérales et résume les principaux éléments du Budget principal des dépenses.

Partie II – Budget principal des dépenses étaye directement la *Loi de crédits*. Le budget principal des dépenses énonce les autorisations de dépenser (crédits) et les sommes à inclure dans les projets de loi de crédits que le Parlement doit adopter afin que le gouvernement puisse mettre en application ses plans de dépenses. Les Parties I et II du budget des dépenses sont déposées simultanément le 1^{er} mars ou avant.

Partie III – Plan de dépenses du ministère est divisé en deux documents :

- 1) **Les rapports sur les plans et les priorités (RPP)** sont des plans de dépenses établis par chaque ministère et organisme (à l'exception des sociétés d'État). Ces rapports présentent des renseignements plus détaillés, pour une période de trois ans, sur les principales priorités d'une organisation, et ce, par résultat stratégique, activité de programme et résultats prévus, incluant des liens aux besoins en ressources connexes. Les RPP contiennent également des données sur les besoins en ressources humaines, les grands projets d'immobilisations, les subventions et contributions, et les coûts nets des programmes. Ils sont déposés au Parlement par le président du Conseil du Trésor au nom des ministres responsables des ministères et des organismes qui dépendent des crédits parlementaires et qui sont désignés aux annexes I, I.1 et II de la *Loi sur la gestion des finances publiques*. Ces documents sont habituellement déposés au plus tard le 31 mars, pour renvoi aux comités qui peuvent ensuite faire rapport à la Chambre des communes conformément au paragraphe 81(4) du Règlement.

- 2) **Les rapports ministériels sur le rendement (RMR)** rendent compte des réalisations de chaque ministère et organisme en fonction des attentes prévues en matière de rendement qui sont indiquées dans leur RPP. Ces rapports sur le rendement, qui portent sur la dernière année financière achevée, sont déposés au Parlement en automne par le président du Conseil du Trésor au nom des ministres responsables des ministères et des organismes qui dépendent des crédits parlementaires et qui sont désignés aux annexes I, I.1 et II de la *Loi sur la gestion des finances publiques*.

Le budget supplémentaire des dépenses étaye directement la *Loi de crédits*. Le budget supplémentaire des dépenses énonce les autorisations de dépenser (crédits) et les sommes à inclure dans les projets de loi de crédits que le Parlement doit adopter afin que le gouvernement puisse mettre en application ses plans de dépenses. Le budget supplémentaire des dépenses est habituellement déposé deux fois par année, soit un premier document au début novembre et un document final au début mars. Chaque budget supplémentaire des dépenses est caractérisé par une lettre alphabétique (A, B, C, etc.). En vertu de circonstances spéciales, plus de deux budgets supplémentaires des dépenses peuvent être publiés au cours d'une année donnée.

Le budget des dépenses, de même que le budget du ministre des Finances, sont le reflet de la planification budgétaire annuelle de l'État et de ses priorités en matière d'affectation des ressources. Ces documents, auxquels viennent s'ajouter par la suite les Comptes publics et les rapports ministériels sur le rendement, aident le Parlement à s'assurer que le gouvernement est dûment comptable de l'affectation

©Sa Majesté la Reine du chef du Canada, représentée par le ministre des Travaux publics et Services gouvernementaux Canada, 2006

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Partie III – Rapport sur les plans et les priorités

Budget des dépenses
2006-2007

Ressources humaines et Développement social Canada



